

ABSTINENCE EDUCATION

HEARINGS

BEFORE A

SUBCOMMITTEE OF THE

COMMITTEE ON APPROPRIATIONS

UNITED STATES SENATE

ONE HUNDRED FOURTH CONGRESS

SECOND SESSION

SPECIAL HEARINGS

JULY 11, 1996—WASHINGTON, DC

JULY 22, 1996—PITTSBURGH, PA

JULY 29, 1996—LANDISVILLE, PA

JULY 29, 1996—SCRANTON, PA

Printed for the use of the Committee on Appropriations



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ABSTINENCE EDUCATION

THURSDAY, JULY 11, 1996

U.S. SENATE,
SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Washington, DC.

The subcommittee met at 9:33 a.m., in room SD-138, Dirksen Senate Office Building, Hon. Arlen Specter (chairman) presiding.
Present: Senator Specter.

NONDEPARTMENTAL WITNESSES

STATEMENT OF ALLAN CARLSON, PH.D., PRESIDENT, ROCKFORD INSTITUTE

OPENING STATEMENT OF SENATOR SPECTER

Senator SPECTER. Good morning, ladies and gentlemen. The Appropriations Subcommittee on Labor, Health and Human Services, and Education will now proceed.

We have a hearing this morning which touches a very basic problem in America with an enormous number of ramifications, and that is the subject of teenage premarital sex and unintended pregnancy. It has a very profound impact on the lives of the teenagers involved. It takes young mothers away from their educational path. It imposes burdens on young fathers which are more often met in the breach than in fulfillment. It imposes a tremendous cost upon our society, both moral, humanitarian, and economic.

The adolescent birth rates in the United States are really astounding when you take a look and find that in our country we have a higher teenage birth rate than any other developed country. In 1993, 513,647 children were born to teenagers, 60 births for every 1,000 15- to 19-year-old females; and 72 percent were out of wedlock.

The taxpayers' cost is some \$6.9 billion in welfare, food stamps, Medicaid, and prison costs. And in terms of resources diverted and productivity lost, adolescent childbearing results in another \$8.9 billion in social costs annually.

In considering these troubling statistics, which represents facts in so many lives, there is something that we can do to reduce the teenage pregnancy rate, and that is counseling. We have set up already a very important program in some schools in Pittsburgh. At Carrick High School, which I visited once, \$250,000 grant, where teenagers have instructions as to values, morality, and a very direct talk about avoidance of premarital sex.

I personally met with a group of teenagers. Very revealing. They really want to talk and they want to be open about it and they want to confront it.

I met with a group in Lancaster, the Susquehanna Group, 14- and 15-year-old young women who have taken the pledge of abstinence. They need to understand how to combat the teen pressure of a young man saying, If you love me, you will let me, by responding, If you love me, you will wait. They need to have responses to cope with this sort of a problem.

Senator Santorum and I and 12 other Senators have introduced legislation to increase the authorization for funding for abstinence programs. We have some additional latitude on the Appropriations Committee to get that done. Appropriations can be made in advance of the authorization, when there are well agreed upon objectives, with the concurrence of the full Senate, obviously, and the House in conference. I believe that the Government can play a very important role in this respect.

During the course of the past year, I have had an opportunity to travel through much of America and talk to many people with very many diverse views, and have come to see that, while abortion is the most divisive issue facing America, there are aspects where we can all agree. I personally am very much opposed to abortion, but I do not think that the Government can control it.

But I do believe that there are some areas of agreement, like abstinence, where we can come together and unify the country, and at the other end of the spectrum, on adoption, to encourage women to carry to term. Again, Senator Santorum and I have introduced legislation on special tax breaks for adoptive parents, of \$5,000, and up to \$7,500 for special needs children.

Just this week I visited an agency in Philadelphia which specializes in special needs children. They have had some extraordinary results. They placed a 15-year-old legally blind young man with cerebral palsy with a family in Alaska. One woman who was there has 19 adopted children and brought with her a youngster in a wheelchair whom she cares for. Just the most extraordinary results.

There are 100,000 children in America who need homes and there are many homes that long for the love of a child. And if we have depletion allowances for oil, why not special allowances for family structure through adoption.

So that is what we are looking at today. We have a very distinguished panel of witnesses, and I would like at this time to call our distinguished panel to step forward: Dr. Allan Carlson, president of the Rockford Institute; Ms. Gracie Hsu, the Family Research Council; Dr. David Hager of the Physicians Resource Council for Focus on the Family and advisory board member for the Medical Institute for Sexual Health; Ms. Kathleen Sullivan, Project Reality; and Mr. William Devlin, director of the Philadelphia Family Policy Council.

Well, with a distinguished panel of this sort, I am going to opt for alphabetical order, if I may, to relieve the chairman of any burden of making choices. And in alphabetical order, we will start with Dr. Carlson.

I note a very distinguished visitor who has just joined us, Dr. Foster. We welcome you, Dr. Foster. If you would not mind, why do you not move your seat one chair forward and join our panel.

Dr. FOSTER. Thank you kindly.

Senator SPECTER. Dr. Carlson, we very much appreciate your joining us, and the floor is yours.

We are going to seek to have 5-minute openings, if we may, leaving us the maximum amount for questions and answers. If you trail a little bit over, the light will blink red, but nothing more will happen.

SUMMARY STATEMENT OF ALLAN CARLSON

Dr. CARLSON. Thank you, Senator. I will try to keep it to 5 minutes.

My name is Allan Carlson. I serve as president of the Rockford Institute in Illinois, a research center on social and cultural issues, including those of family life and sexuality. Trained in modern social history, I have written two books and numerous articles dealing with the questions of teenage sexuality and pregnancy. I have served as a consultant on these issues for the U.S. Department of Health and Human Services, the National Academy of Sciences, and internationally for the Ministry of Social Protection in the Russian Federation.

From 1988 through 1993, I also served via Presidential appointment on the National Commission on Children, sometimes known as the Rockefeller Commission after its chairman, Senator Jay Rockefeller of West Virginia.

I commend you, Senator, for convening this session to discuss the questions of adolescent childbearing and abstinence education. The report recently released by the Robin Hood Foundation, "Kids Having Kids," provides a valuable addition to the literature on the social costs of family failure. Its useful contributions include a careful delineation of two very different categories of so-called teenage mothers, those ages 18 to 19 and those ages 17 or younger, and a correct focus on the latter category as the more troubled category.

The calculation of a gross annual cost to society of adolescent childbearing of \$29 billion also provides frank testimony about the consequences of deterioration of our Nation's family structure.

Yet I want to raise a few cautions for this subcommittee's consideration. To begin with, we need to remember that there is, in fact, a good to be found within the adolescent pregnancy problem, namely, the desire to bear a child. We must recall that the desire to have a baby is natural to our species, rooted in human nature, a healthy acceptance of the biological urge to reproduce.

Our central problem is not adolescent pregnancy per se, but rather the breakdown of cultural and moral guideposts that for generations channeled this healthy natural urge into stable marriage. Every successful human society in all times and places has ordered its educational, legal, and cultural practices to ensure that sexual communion, pregnancy, and childbearing would normally occur with marriage.

This ensured that these new children would have vastly improved life prospects and that the social costs of troubled children would be minimal. Not only revealed religion, but modern science

testifies to this truth. As paleo-anthropologist C. Owen Lovejoy showed in *Science* magazine several years ago, human survival and progress has since before the dawn of the Pleistocene age and, by implication, to the present rested on this very aspect of human character, namely intensified parenting in social relationships, monogamous pair bonding, and specialized sexual reproductive behavior. He implies in his work that the rearing of children within monogamous marriage is, in fact, the central trait of being human, the social key to evolutionary progress.

The core social problem we now face is that the educational, legal, and cultural practices of modern America no longer send consistent signals that celebrate and encourage stable heterosexual marriage. To the contrary, they often send messages that attack marriage.

Our necessary common task is one of cultural reconstruction, rebuilding a culture of marriage to replace our contemporary cultures encouraging illegitimacy and easy divorce. Time does not allow me to discuss the causes of this broader problem nor to discuss all that would be done.

I would like to close with a few comments regarding implications raised regarding sex education. Some might be tempted to use the figures provided by the Robin Hood report to justify sex education curricula that disparage parenthood or further separate the natural bond of sexuality to marriage. These curricula would directly or indirectly condone adolescent sexual behavior, seeking only to ensure its contraceptive nature.

Sadly, this has been the message provided by all too many sex education curricula used in American schools, with dismal consequences. On the other hand, many of the so-called abstinence education programs, such as Kathleen Sullivan's Project Reality, place their focus on cultural and moral reconstruction. They praise marriage as the only proper structure for socially constructive childbearing. They encourage the self-esteem of young men and women and the virtue of delaying sexual involvement until it can be responsibly focused.

They take the healthy natural urge of young women to bear and rear babies and work to channel that urge into the building and maintenance of stable marriage. As others will note in this hearing, I believe, their success is demonstrable.

This is why I was pleased when the bipartisan National Commission on Children recommended the dramatic expansion of the adolescent family life program, or title XX, in its 1991 final report. Specifically:

The National Commission on Children recommends that the Congress appropriate an additional \$33 million, bringing total program funding to approximately \$40 million. We also recommend continued evaluation of these innovative programs to identify effective models and determine the most appropriate directions for subsequent expansion.

PREPARED STATEMENT

Looking at the evidence, persons as diverse in opinion as Senator Rockefeller, Children's Defense Fund President Mary Wright Edelman, Governor Bill Clinton, HHS Commissioner Wade Horn, Kay James, and me could agree in 1991 on the demonstrable vir-

tues of abstinence education. Adjusted into 1996 terms and figures, I urge the members of this panel to do the same.

Thank you.

Senator SPECTER. Thank you very much, Dr. Carlson.

[The statement follows:]

PREPARED STATEMENT OF ALLAN CARLSON

My name is Allan Carlson. I serve as President of The Rockford Institute, in Illinois, a research center on social and cultural issues, including those of family life and sexuality. Trained in modern social history, I have written two books¹ and numerous articles dealing with the questions of teenage sexuality and pregnancy. I have served as a consultant on these issues for the U.S. Department of Health and Human Services, for the National Academy of Sciences, and, internationally, for The Ministry for Social Protection of the Russian Federation. From 1988 through 1993, I also served via Presidential appointment on The National Commission on Children, sometimes known as "The Rockefeller Commission," after its chairman, Senator Jay Rockefeller of West Virginia.

I commend Senator Specter for convening this session to discuss the questions of adolescent childbearing and abstinence education. The special report recently released by The Robin Hood Foundation, "Kids Having Kids," provides a valuable addition to the literature on the social costs of family failure.² Its useful contributions include a careful delineation of two very different categories of "teenage mothers"—those ages 18–19 and those ages 17 or younger—and a correct focus on the latter category as the more serious problem. The calculation of a "gross annual cost to society of adolescent childbearing" of \$29 billion also provides frank testimony about the consequences of the deterioration of our nation's family structure.

Yet I want to raise a few cautions for this Subcommittee's consideration. To begin with, we need remember that there is, in fact, a good to be found within the adolescent pregnancy problem: namely, the desire to bear a child. We must recall that the desire to have a baby is natural to our species, rooted in human nature, a healthy acceptance of the biological urge to reproduce. Our central problem is not "adolescent pregnancy" per se, but rather the breakdown of cultural and moral guideposts that for generations channeled this healthy, natural urge into stable marriage. Every successful human society, in all times and places, has ordered its educational, legal, and cultural practices to insure that sexual communion, pregnancy and childbearing would normally occur within marriage. This insured that these new children would have vastly improved life prospects; and that the "social costs" of troubled children would be minimal.

Not only revealed religion, but modern science testifies to this truth. As paleo-anthropologist C. Owen Lovejoy showed in *SCIENCE* magazine, human survival and progress has—since before the dawn of the Pleistocene Age—rested on this very aspect of human character, namely: "intensified parenting and social relationships, monogamous pair bonding, [and] specialized sexual-preproductive behavior." He implies that the rearing of children within monogamous marriages is, in fact, the central trait of being human, the social key to evolutionary progress.³

The core social problem we now face is that the educational, legal, and cultural practices of modern America no longer send signals that celebrate and encourage stable heterosexual marriage. To the contrary, they often send messages that attack marriage. Our necessary common task is one of cultural reconstruction, rebuilding "a culture of marriage" to replace our contemporary "cultures" of illegitimacy and divorce.

Time, unfortunately, does not allow me to discuss the causes of this broader problem, nor discuss all that should be done. Yet I would like to comment on the implications raised regarding sex education.

Some might be tempted to use figures such as that provided by The Robin Hood Foundation report to justify sex education curricula that disparage parenthood, or further separate the natural bond of sexuality to marriage. These curricula would

¹ "Family Questions: Reflections on the American Social Crisis" (New Brunswick, NJ: Transaction, 1988), particularly chapters 6 and 7; and "The Swedish Experiment in Family Politics: The Myrdals and the Interwar Population Crisis" (New Brunswick, NJ: Transaction, 1991).

² Earlier works include two volumes published by The Rockford Institute: "When Families Fail . . . The Social Costs," Ed. Bryce J. Christensen (Lanham, MD: University Press of America, 1991; and "The Retreat From Marriage: Causes and Consequences," Ed. Bryce J. Christensen (Lanham, MD: University Press of America, 1990).

³ C. Owen Lovejoy, "The Origin of Man," *SCIENCE* 211 (23 January 1981): 348.

directly or indirectly condone adolescent sexual behavior, seeking only to ensure its contraceptive nature. Sadly, this has been the message provided by all too many sex education curricula used in American schools, with dismal consequences.

On the other hand, many of the so-called "Abstinence Education" programs—such as Project Reality—place their focus on cultural and moral reconstruction. They praise marriage as the only proper structure for socially constructive childbearing. They encourage the self-esteem of young men and women, and the virtue of delaying sexual involvement until it can be responsibly focused within a socially-approved covenant. They take the healthy, natural urge of young women to bear and rear babies, and work to channel that urge into the building and maintenance of stable marriages. As others will note in this hearing, their success is demonstrable.

This is why I was pleased when the bipartisan National Commission on Children recommended the dramatic expansion of the Adolescent Family Life Program, or Title XX, in its 1991 final report. Specifically: "The National Commission on Children recommends that Congress appropriate an additional \$33 million, bringing total program funding to approximately \$40 million We also recommend continued evaluation of these innovative programs to identify effective models and determine the most appropriate directions for subsequent expansions."⁴ Looking at the evidence, persons as diverse as Senator Rockefeller, Children's Defense Fund President Marian Wright Edelman, Governor Bill Clinton, HHS Commissioner Wade Horn, Kay C. James, and me could agree in 1991 on the demonstrated virtues of "abstinence education." Adjusted into 1996 terms and figures, I urge the members of this panel to do the same.

Thank you for your time, and your attention.

STATEMENT OF WILLIAM DEVLIN, DIRECTOR, PHILADELPHIA FAMILY POLICY COUNCIL

Senator SPECTER. I would like now to turn to Mr. William Devlin of the Philadelphia Family Policy Council. Mr. Devlin and I recently participated in an event at Girls High School in Philadelphia; we were trying to emphasize the issues of abstinence and restraint. Welcome, Bill. The floor is yours.

Mr. DEVLIN. Thank you. Good morning. Thank you for this opportunity to testify before this subcommittee on the issue of abstinence education and the role that the U.S. Senate and each of us as individual citizens can have in communicating hope to our teenagers.

The Philadelphia Family Policy Council appreciates this opportunity once again to work with Senator Specter, as we did this past March. At that time Senator Specter, along with Senator Santorum, Governor Tom Ridge, and Philadelphia City Council, and may I add unanimously, proclaimed the third week of March 1996 as a week dedicated to the promotion of sexual purity and abstinence as a message of hope for our teenagers and as a solution to the skyrocketing occurrences of premarital teenage births, STD's, and HIV-AID's infection.

I have enclosed copies of resolutions and press clippings related to that event, which will now be celebrated each March in Philadelphia. We want to publicly thank these elected officials for taking an unpopular stand and exhibiting moral leadership in an age of moral relativity.

You have already heard or will hear today of the devastating results of now three decades of the message of safe sex. I will not be focusing my remarks on the failure of the safe sex message and the title X program. The collective national cultural conclusion on this matter is that we have failed and failed miserably.

⁴"Beyond Rhetoric: A New American Agenda for Children and Families." Final report of the National Commission on Children (Washington, DC: U.S. Government Printing Office, 1991), p. 246.

We have failed our teenagers when we have told them that there are no consequences to having sexual relations outside the protective boundaries and responsibilities of marriage. We can talk about the dramatic increase of STD's from 5 in 1970 to 25 in 1996, but, as the teenagers tell me: Mr. Devlin, there are no condoms for the heart.

We must create a new collective national cultural consensus centered on abstinence, sexual purity, and saving sex for marriage. Each year I have the privilege of speaking to thousands of young men ages 12 through 19 in schools, youth groups, community centers, camps, and street corners—urban, suburban, and rural. The message I share with them is clear and unequivocal: For the sake of your own body, mind, and soul, I challenge you to practice sexual purity.

I am not a scientist. I am a director of an urban-based interracial progressive profamily organization. I am an abstinence educator. And most importantly, I am the father of five children, with two teenage daughters.

In my testimony today I want to passionately appeal to all of us in this room to reinforce the message of sexual purity to our own grandchildren and children, to our schools, to our neighborhoods, and to ourselves. As I present the message of abstinence to teenagers of all colors, races, cultures, and socioeconomic backgrounds, their response to my presentation is clear: Mr. Devlin, thank you for coming to talk to us today about saving sex for marriage. We are tired of the adults who come to our school and talk about condoms and devices and chemicals. They treat us like we are animals. We are people and we want to have a future. I am going to wait to have sex until marriage.

Abstinence-based education is a reality-based message. It is not a message of fear or restrictions. Rather, it is about life, hope, liberty, promise, freedom, respect, honor, virtue, forgiveness, commitment, responsibility. I get excited when I see the possibilities of establishing a new sexual revolution, a revolution of virtue, based upon sexual purity, a message frankly that transcends racial, cultural, and economic barriers, a positive message for our teenagers. Will you join me in this revolution?

When I speak to these young men I tell them the story of my own life, how I was abandoned by my father at age 14 and then seeing my mother die a very tragic death 1 year later. After high school I found myself dealing with issues of life and death in the country of South Vietnam. I then returned to the States and fell in love with a beautiful young woman who is now my wife of almost 20 years.

The night after I asked Nancy to marry me as a young man in my twenties, I wrote to her a promise that I would be sexually pure the entire length of my engagement, of our engagement. I was able to keep that promise.

And I share with these young men, these thousands of young men: Sex is a gift only to be opened within the protective relationship of marriage. I share with them that if I could save sex for marriage and continue to remain faithful to my wife today, then anybody can. It is an attainable goal for them as young men and teenagers.

And I will conclude. One year ago my wife and I had the privilege of taking our two teenage daughters out to dinner and, along with their agreement and excitement, presented to them sexual purity rings which after dinner we placed on their respective fingers—a small piece of jewelry that is a visible reminder to them and to the young men and women around them that they have made a decision to remain sexually pure until marriage.

How many others in this room need to challenge their children, teenagers, and grandchildren to take this important step? I respectfully ask you to consider this.

How can you as men and women in the U.S. Senate help? You can join the new sexual revolution of abstinence by challenging the teenagers in your sphere of influence to save sex for marriage. They will love you and appreciate you for sharing this information with them. Let us require our public schools to teach abstinence and let us stop throwing money down the hole of title X.

PREPARED STATEMENT

Finally, all in this room, myself included, must lead by example in maintaining lives that are filled with hope and virtue. Teach the good news about sexual purity at all times and, when necessary, use words.

Senator, with your permission I would like to include some documents for the official record.

Senator SPECTER. Thank you very much, Mr. Devlin. They will be made a part of the record.

[The statement follows:]

PREPARED STATEMENT OF WILLIAM DEVLIN

Good Morning. Thank you for this opportunity to testify before this subcommittee on the issue of abstinence education and the role that the U.S. Senate, and each of us as individual citizens can have in communicating hope to our teenagers.

The Philadelphia Family Policy Council appreciates this opportunity, once again, to work with Senator Specter as we did this past March. At that time, Senator Specter along with Senator Santorum, Governor Tom Ridge, and Philadelphia City Council, proclaimed the third week of March as a week dedicated to the promotion of sexual purity and abstinence as a message of hope for our teenagers and as a solution to the skyrocketing occurrences of pre-marital teenage births, STD's and HIV/AIDS infection. I have enclosed copies of resolutions and press clippings related to that event which will be celebrated now each March in Philadelphia. We want to publicly thank these elected officials for taking an unpopular stand and exhibiting moral leadership in an age of moral relativity.

You have already heard or will hear today of the devastating results of now three decades of the message of "safe sex." I will not be focusing my remarks on the failure of the "safe sex" message and the Title X program. The collective national cultural conclusion on this matter is that we have failed and failed miserably. We have failed our teenagers when we have told them that there are no consequences to having sexual relations outside the protective boundaries and responsibilities of marriage. We can talk about the dramatic increase of STD's from 5 in 1970 to 25 in 1996; we can talk about HIV/AIDS and we can discuss teen pregnancy as well; but as the teenagers tell me, "Mr. Devlin, there are no condoms for the heart."

We must create a new collective national cultural consensus centered on abstinence, sexual purity and saving sex for marriage. Each year, I speak to thousands of young men ages 12–19 in schools, youth groups, community centers, camps, and street corners—urban, suburban and rural. The message I share with them is clear and unequivocal—for the sake of your own body, mind and soul, I challenge you to practice sexual purity. I am not a scientist, I am the director of an urban-based, interracial progressive pro-family organization; I am an abstinence educator; and I am the father of five children with two teenage daughters.

In my testimony today, I want to passionately appeal to all of us in this room to reinforce the message of sexual purity to our own children and grandchildren, to our schools, to our neighborhoods and to ourselves. As I present the message of abstinence to teenagers of all colors, races, cultures and socio-economic backgrounds, their response to my presentation is clear—"Mr. Devlin, thank you for coming to talk to us today about saving sex for marriage. We are tired of the adults who come to our school and talk about condoms, devices and chemicals—they treat us like we're animals. We're people and we want to have a future. I'm going to wait to have sex until marriage". Abstinence based education is a reality based message; it's not a message of fear or restrictions; rather, it's about life, hope, liberty, promise, freedom, respect, honor, virtue, forgiveness, commitment, responsibility. I get excited when I see the possibilities of establishing a new sexual revolution—a revolution of virtue based upon sexual purity. A message that transcends racial, cultural and economic barriers. A positive message for our teens. Will you join me in this revolution?

When I speak to these young men I tell them the story of my own life—how I was abandoned by my father at 14 and then seeing my mother die a very tragic death one year later. After high school I found myself dealing with issues of life and death in the country of South Vietnam. I then returned to the States and fell in love with a beautiful young woman who is now my wife of almost twenty years. The night after I asked Nancy to marry me, as a young man in my twenties, I wrote to her a promise that I would be sexually pure the entire length of our engagement. I was able to keep that promise. And I share with these young men—sex is a gift only to be opened within the protective relationship of marriage. I share with them that if I could save sex for marriage—and continue to remain faithful to my wife today, then anybody can. It's an attainable goal for them as young men/teenagers.

One year ago my wife and I had the privilege of taking our two teenage daughters out to dinner and, along with their agreement and excitement, presented to them sexual purity rings which, after dinner, we placed on their respective fingers. A small piece of jewelry that is a visible reminder to them and to the young men and women around them that they have made a decision to remain sexually pure until marriage. How many others in this room need to challenge their children/their teenagers/their grandchildren to take this important step. I respectfully ask you to consider this.

How can you as men and women in the U.S. Senate help? You can join the new sexual revolution of abstinence by challenging the teenagers in your sphere of influence to save sex for marriage. They will love you and appreciate you for sharing this information with them. Let's require our public schools to teach abstinence and let's stop throwing money down the hole of Title X. Finally, all of us in this room, myself included, must lead by example in maintaining lives that are filled with hope and virtue. Teach the good news about sexual purity at all times and when necessary, use words.

[CLERK'S NOTE.—The documents referred to could not be printed in the record but are available for review in the subcommittee's files.]

STATEMENT OF W. DAVID HAGER, M.D., PHYSICIANS RESEARCH COUNCIL FOR FOCUS ON THE FAMILY

Senator SPECTER. I would like to turn now to Dr. David Hager, Physicians Research Council for Focus on the Family. Thank you for joining us, Dr. Hager. The floor is yours.

Dr. HAGER. Senator Specter, I am honored that you would allow me to share with you factual information about teenage sexuality and consequences of that behavior as we consider strategies to help prevent these events that are actually robbing our teenagers of their youth and perpetuating tremendous problems for our society. I am able to relate to you information from my perspective as a clinician and an academician in obstetrics and gynecology and in infectious disease.

You are all familiar with the major consequences of pregnancy, STD's, and emotional problems resulting from the sexual activity that occurs outside of mutual monogamy. There are more than 1 million pregnancies among teens in the United States each year

and over one-half of a million births. Even more striking are the number of out-of-wedlock births among women 19 years of age and younger. Statistics for 1990 indicate that 92 percent of African-American births, 57 percent of white births in this age group are out of wedlock.

Some have said that this is primarily a problem among minorities, but I would remind you that the trends among whites are on the same graphic increase. Of major concern is the 6- to 10-year discrepancy between the age of the father of the baby and the infant's mother. Eighty-three percent of the fathers do not live with the mother or child.

Sexually transmitted diseases, of which there are more than 20, continue to wreak havoc physically and economically in this country. There are more than 12 million new cases of STD's annually. The rates of the bacterial infections chlamydia and gonorrhea have plateaued or slightly decreased as of 1993, but incurable viral STD's continue to increase.

One-fifth of all Americans now have a viral STD. Twenty-five percent of newly diagnosed HIV is among young people less than 22 years of age. Estimates of infection with herpes and human papilloma virus are at an all-time high. HPV causes 90 percent of all precancerous and cancerous lesions of the cervix in women.

Numerous studies in the literature addressing the question of why teens become sexually active all indicate that initiating sexual intercourse before age 20 is not an isolated event in and of itself. The CDC in an interview survey reported that if teens initiated intercourse before age 18, 45 percent had four or more partners. If they initiated coitus after age 19, only 17 percent had four or more partners.

Small and Lester found that parental involvement in the transmitting of parents' values were significant factors in preventing early sexual activity. Factors closely relate were poor school performance, low educational aspiration, and alcohol and drug use.

The number of teens who are sexually active is debatable, depending upon the survey or study you choose to believe. A recent MMWR publication indicates that high school students reporting ever having had intercourse decreased from 54.2 percent in 1990 to 53 percent in 1993. Unfortunately, most teenagers do not make the right choices soon enough. A recent Seventeen magazine poll says that 81 percent of girls and 60 percent of boys said they wished they had waited until they were older to initiate intercourse.

Why have these young people had to experience such regret? Could it be that our emphasis in sex education has been misdirected? In their study of 976 Chicago junior high school students, Benson and Torpy found no beneficial effect between knowledge of reproductive biology and age of first intercourse. They said: "Our findings suggest that current school-based efforts to alter teen pregnancy rates and sexual behavior are unlikely to succeed."

Recognizing that education alone was not the answer, governmental agencies have promoted condoms as a solution to the problem. There is a 15.8-percent annual failure rate for condoms, for pregnancy with condoms. Failure rates are highest among single African-American women at 31 percent. Of greater importance is

the fact that among teenage women who use birth control pills, only 3 percent will also insist on the use of condoms by their partners to prevent STD's.

Abstinence is a term which must be defined. Some organizations use the term to mean anything other than penetrative vaginal intercourse. Yet STD's can be transmitted by secretions exchanged with outercourse, mutual masturbation, and oral-genital sex.

Other organizations promote an abstinence-but or abstinence-plus concept, which basically tells our young people: We suggest you abstain, but we really do not believe you can, so here are the condoms. This mixed message is degrading to young people.

I am referring to abstinence as a character-based decision that is lifelong and results in mutually monogamous relationships and marriage. For those who, because of previous behavior, cannot adhere to this definition, the time to initiate abstinent behavior is now. There are no data to show that young people can repetitively engage in nonpenetrative sex and not progress to penetrative sex.

Abstinence sexuality education is a directive sex education approach emphasizing self-control, self-respect, respect for others, responsibility, maturity, and good health. What can be done to thwart the problems mentioned herein? Remember that the recent small decreases in teen pregnancy rates and bacterial STD's have occurred in conjunction with a reported decrease in sexual activity. Abstinence does work.

We must enforce statutory rape laws. We must revise the welfare system that encourages teenagers to get pregnant and remain single if they give birth. We must develop a broad spectrum character-based sex education program which addresses issues such as substance abuse as well. The Medical Institute for Sexual Health national guidelines for sexuality and character education do this.

We must define abstinence for what it is, the only medically safe and morally responsible choice for unmarried persons. We must emphasize abstinence first, not abstinence-but education. Realizing that condoms offer some protection, but not total protection, for pregnancy and STD's, they offer no protection for emotional consequences.

PREPARED STATEMENT

And we must emphasize the role of the family as the principal support unit for each child. We must not stop until we see these concepts incorporated into the fabric of our sexuality education programs. If not, this disease will consume us.

Thank you.

Senator SPECTER. Thank you very much, Dr. Hager.

[The statement follows:]

PREPARED STATEMENT OF W. DAVID HAGER

Senator Spector, and distinguished members of the committee, I am honored that you would allow me to share with you factual information about teenage sexuality and consequences of that behavior as we consider strategies to help prevent these events that are robbing our teenagers of their youth and perpetuating tremendous problems for our society.

I am able to relate information to you from my perspective as a clinician and academician in obstetrics and gynecology and infectious disease and from my role as an advisory board member for the Medical Institute for Sexual Health.

CONSEQUENCES OF TEEN SEXUAL ACTIVITY

You are all familiar with the major consequences of sexual activity outside of marriage among teens in this country. Consequences including: pregnancy, sexually transmitted diseases (STD) and emotional problems.

There are more than one million pregnancies among teens in the United States each year.¹ Even more striking are the number of out-of-wedlock births among women 19 years of age and younger. The Advance Report for Final Natality Statistics for 1990 indicates that 92 percent of African American births and 57 percent of white births in this age group were out-of-wedlock.² Some have said that this is primarily a problem among minorities, but I would remind you that the trends among whites are on the same graphic increase.

Of major concern is the discrepancy between the age of the father of the baby and the infant's mother. In our teen pregnancy clinic at the University of Kentucky, the mean age difference between the father of the baby and the teenage mother is 6.3 years.³ Eighty-three percent of these fathers do not live with the mother or child.³ What results is a welfare catastrophe. Fifty percent of all families receiving AFDC are headed by an unmarried parent.⁴ Ninety percent of these single parents are women,⁵ and 80 percent of them receive welfare within five years of becoming a parent.⁶

Sexually transmitted diseases, of which there are more than 20, continue to wreak havoc physically and economically in this country. The Centers for Disease Control and Prevention, where I formerly worked, summarizes STD incidence trends in the STD Surveillance publication.⁷ There are more than 12 million new STD cases annually. The rates of the bacterial infections *Chlamydia trachomatis* and *Neisseria gonorrhoeae* have plateaued or slightly decreased as of 1993. Incurable viral STD's continue to increase however. One-fifth of all Americans have a viral STD. One and a half million persons are HIV positive with a mortality rate of 69 percent. Twenty-five percent of newly diagnosed HIV is in young people less than 22 years old. Estimates of infection with *Herpes simplex* virus and Human Papilloma Virus (HPV) are at all time highs. Herpes recurs in 70 percent of infected persons and results in over 300 cases of neonatal herpes each year. HPV causes over 90 percent of all precancerous and cancerous lesions of the cervix in women⁸ and can also cause vulvar cancer in women and penile cancer in men. Cervical cancer results in 4,600 deaths each year in the United States.

We seldom mention another area of concern, the emotional and psychological consequences of premarital sexual activity. Loss of self esteem, depression and suicidal ideation among others are prevalent in this group of teens.

RISK FACTORS FOR TEEN SEXUAL ACTIVITY

Numerous studies in the literature have addressed the question of why teens become sexually active. These studies all indicate that initiating sexual intercourse before age 20 is not an isolated event in and of itself. The earlier a teenager chooses to initiate intercourse, the greater the chance that they will expose themselves to the single greatest risk factor for acquiring an STD, multiple partners. The CDCP, in an interview survey, reported that if teens initiated intercourse before age 18, 45 percent had 4 or more partners, whereas if they initiated coitus after age 19 only 17 percent had 4 or more partners.⁹

Small and Luster found that parental involvement and the transmitting of the parent's values were significant factors in preventing early sexual activity. Factors closely related were poor school performance, low educational aspirations and alco-

¹ CDC Surveillance for pregnancy and birth rates among teenagers by state—United States 1980–1990. *MMWR* 1993; 42:2.

² National Center for Health Statistics, Advance Report of Final Natality Statistics., 1990. *Monthly Vital Statistics Report*, Vol. 41, No. 9, Suppl.

³ Woods S., personal communication.

⁴ U.S. Department of Health and Human Services, Administration for Children and Families, Characteristics and Financial Circumstances of AFDC Recipients, fiscal year 1990 (Washington, D.C.: U.S. Government Printing Office, 1991), Table 14.

⁵ Davis and McCaul: The emerging crisis: Current and projected status of children in the United States. August, ME: Maine State Department of Education. *ERIC Document Reproduction Service No. 348 434*, p. 22, 1991.

⁶ Nicholas, Zill, Moore, et al.: Welfare mothers as potential employees: A statistical profile based on national survey data, (Washington, D.C.: Child Trends, Inc.), Table 17.

⁷ CDC National Disease and Therapeutic Index, Anniston, MD, 1993.

⁸ Bosch FX, Manos MM, Munoz N, et al: Prevalence of human papilloma virus in cervical cancer: A world wide perspective. *J Nat Cancer Inst* 1995; 87:796–802.

⁹ Centers for Disease Control and Prevention, *MMWR*, 1991;39:398.

hol and drug use.¹⁰ A review of surveys by Seidman and Rieder indicates that adolescent sexual involvement is closely associated with use of drugs, multiple partners, frequent intercourse, no contraception with first intercourse, lack of condom use and less discriminating recruitment of sex partners. Early age of first intercourse was directly linked to risk of STD's and to cervical cancer in women.¹¹ Sexual abuse, substance abuse and an absent father in the home are frequently associated with teenage sexual activity.

Interestingly, White and DeBlassie found that parents were, "rated highest in terms of influence on sexual opinions, beliefs and attitudes, but lower than friends, school and books as sources of sexual information"¹²—an indication of where some of the educational effort must be directed.

RATES OF TEEN SEXUAL ACTIVITY

The number of teens who are sexually active is debatable depending upon the survey or study you choose to believe. The most recent Youth Risk Behavior Survey from the CDCP indicates that approximately 30 percent of freshmen and 80 percent of senior high school students admit to ever having intercourse.¹³ A recent MMWR publication indicates that high school students reporting ever had intercourse decreased from 54.2 percent in 1990 to 53 percent in 1993.¹⁴ Remember these figures when we discuss why pregnancy rates and some STD rates have recently decreased.

Unfortunately, most teenagers did not make the right choices soon enough. In a recent *Seventeen Magazine* poll, 81 percent of girls and 60 percent of boys said they wished they had waited until they were older to initiate intercourse.¹⁵ Why have these young people had to experience such regret? Could it be that our emphasis in sex education has been misdirected?

FAILURE OF THE CURRENT SEX EDUCATION SYSTEM

In their excellent study of 976 Chicago, junior-high school students, Benson and Torpy found no beneficial effect between knowledge of reproductive biology and age of first intercourse. Education alone and the use of school-based clinics will not solve the problem. They said, "Our findings suggest that current school-based efforts to alter teen pregnancy rates and sexual behavior are unlikely to succeed."¹⁶

Recognizing that education alone was not the answer, governmental agencies have promoted condoms as the solution to the problem. Obviously, condoms must be used correctly and with every act of intercourse to effectively prevent pregnancy and STD's. Condoms offer no protection for the emotional consequences of premarital sexual activity.

The September 22, 1995 issue of MMWR reported condom use among sexually active teens to be up slightly (52.8 percent), while oral contraceptive use was stable at 18.4 percent.¹⁷ While this sounds encouraging, several factors must be considered. Jones and Forrest reported a 15.8 percent annual failure rate for pregnancy with condoms.¹⁸

Failure rates are highest among single African-American women (31 percent). Of greater importance is the fact that among teenage women who use birth control pills, only 3 percent will also insist on the use of condoms by their partner to protect against STD's.¹⁹

Condoms do not adequately protect against some STD's. In a meta analysis, Weller has reported a 31 percent failure rate of condoms in preventing HIV infection

¹⁰ Small SA, Luster T: Adolescent Sexual Activity: An ecological, risk factor approach. *J Marriage Fam* 1994;56:181-92.

¹¹ Seidman SN, Rieder RO. A review of sexual behavior in the United States. *Am J Psych* 1994; 151(3):330-41.

¹² White SD, DeBlassie RR: Adolescent sexual behavior. *Adolescence* 1992; 27(105):183-91.

¹³ CDC Youth Risk Behavior Survey. *MMWR* 1992;40:885-88.

¹⁴ CDC, Trends in Sexual Risk Behavior Among High School Students United States, 1990, 1991, 1993. *MMWR* 1995; 44:125.

¹⁵ Teenagers Under Pressure, *Seventeen Magazine*, May 1995.

¹⁶ Benson MD, Torpy EJ: Sexual behavior in junior high school students. *Obstet Gynecol* 1995;85:279-84.

¹⁷ CDC, State Specific Pregnancy and Birth Rates Among Teenagers United States 1991-1992. *MMWR* 1995;44:677-81.

¹⁸ Jones ER, Forrest J: Contraceptive failure rates based on the 1988 NSFG. *Fam Plan Perspec* 1992;24:12-19.

¹⁹ Jones EF, Forrest J: Contraceptive failure in the U.S.: Revised estimates from the 1982 National Survey of Family Growth. *Fam Plan Perspec* 1989; 21:3.

among couples where one partner was HIV positive.²⁰ In the oft-quoted deVincenzi paper, only 123 of 563 couples (21.8 percent) recruited into the study, knowing that one partner was HIV positive, could be motivated to use condoms systematically."²¹

Consumer Reports surveyed condom users and found that among persons with multiple sexual partners, those who never use condoms or use them inconsistently outnumbered those who did 11 times.²² I would propose therefore, that barrier methods of contraception have failure rates that are unacceptably high for pregnancy and STD's and do nothing to alter the emotional consequences. Small and Luster say that, "Efforts must not only be made to encourage teens to delay the age at which sexual activity begins, but prevention efforts must also try to minimize the negative consequences that can result from early intercourse."¹⁰ Since current methods have failed, how can this be done?

ABSTINENCE FIRST

Abstinence is a term which must be defined. Some organizations use the term to mean anything other than penetrative vaginal intercourse. I have indicated the risks of this type of behavior since STD's can be transmitted by secretions exchanged with intercourse, mutual masturbation and oral-genital sex.

Other organizations promote an "abstinence-but" concept. Although this may be advertised as "abstinence-plus", it basically tells young people, we suggest you abstain but we really do not believe that you can, so use condoms. This mixed message is degrading to young people.

The interpretation of abstinence by young people varies widely. For many, it means to abstain from more than one partner, for others it means I am not currently sexually active or haven't been for 2-3 months. I am referring to abstinence as a character-based decision that is life-long and results in a mutually monogamous relationship in marriage. For those who, because of previous behavior, cannot adhere to this definition, the time to initiate abstinent behavior is now. There are no data to show that young people can repetitively engage in non-penetrative sex and not progress to penetrative sex.

Abstinence sexuality education is a directive sex education approach emphasizing values. Non-directive approaches which encourage teens to, "make your own decision," based on how you feel or what you feel is right have failed to stem the tide of teen sexual activity, pregnancy and STD's according to recent articles by Whitehead²³ and by Lickona.²⁴

Premarital sexual abstinence is not a temporary contraceptive. It is a disciplined lifestyle that helps to develop character traits that serve a person well throughout life. Even married couples must be able to practice sexual self control. Premarital sexual abstinence promotes self control, self respect, respect for others, responsibility, maturity and good health.²⁵ It is an "abstinence first" approach.

CONCLUSIONS

What can be done to thwart the problems mentioned herein? Remember that the recent small decreases in teen pregnancy rates and bacterial STD rates have occurred in conjunction with a reported decrease in sexual activity. Abstinence does work.

1. We must enforce statutory rape laws. The epidemic of older men impregnating and infecting teenage girls must be corrected.

2. We must revise the welfare system that encourages teenagers to get pregnant and to remain single if they give birth.

3. We must develop a broad spectrum, character-based sex education program which addresses issues such as substance abuse as well. The MISH National Guidelines for Sexuality and Character Education do this.

4. We must define abstinence for what it is, the only medically safe and morally responsible choice for unmarried persons.

5. We must emphasize "abstinence first" not "abstinence but" education realizing that condoms offer some protection but not total protection for pregnancy and STD's. They offer no protection for the emotional consequences of sexual activity outside of marriage.

²⁰ Weller SC: A meta-analysis of condom effectiveness in reducing sexually transmitted HIV. *Soc Sci Med* 1993;36:1635-43.

²¹ deVincenzi I: Comparison of female to male and male to female transmission of HIV in 563 stable couples. *Brit Med J* 1992; 304:809-13.

²² How reliable are condoms?, *Consumer Reports*, May 1995, p. 320-25.

²³ Whitehead BD: The failure of sex education. *The Atlantic Monthly* 1994;274:55-94.

²⁴ Lickona T. Where sex education went wrong. *Educational Leadership* 1993;51, No. 3.

²⁵ MISH, *National Guidelines for Sexuality and Character Education*. Austin, TX 1996, p.7.

6. We must emphasize the role of the family as the principal support unit for each child.

We must not stop until we see these concepts incorporated into the fabric of our sexuality education programs. If not, the disease will consume us.

STATEMENT OF GRACIE HSU, FAMILY RESEARCH COUNCIL

Senator SPECTER. I now turn to Ms. Gracie Hsu from the Family Research Council. Thank you for being here, Ms. Hsu, and we look forward to your testimony.

Ms. HSU. Thank you, Mr. Chairman. As you are well aware, the Family Research Council [FRC] has long been an advocate of premarital sexual abstinence and of saving sex for marriage, its proper context. We also strongly encourage adoption as a superior alternative to abortion.

In the past, the Family Research Council has also supported the Adolescent Family Life [AFL] Act, or title XX of the Public Service Act, because it has historically been a solid abstinence-centered and adoption-promoting program. Indeed, the AFL legislation was crafted in order to sponsor programs and research projects which promote society's traditional sexual ethic of abstinence until marriage.

The AFL Act articulates a compelling moral framework for reversing the tide of adolescent promiscuity, out of wedlock pregnancy, and abortion, for it recognizes the fact that sex is not simply a physical act, but that it also involves moral, emotional, and spiritual consequences.

The two primary purposes of AFL are to find effective means within the context of the family of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members and to promote self-discipline and other prudent approaches to the problems of adolescent premarital sexual activity, including adolescent pregnancy; and two, to promote adoption as an alternative for adolescent parents.

For years, AFL has stood alone in a sea of contraceptive funding, promoting prevention programs rather than simply risk reduction. And even with its limited annual budget of about \$7 million, AFL has succeeded in helping young people choose the healthiest lifestyle of premarital sexual abstinence. Some AFL program successes include Teen-Aid, Choosing the Best, the Art of Loving Well, and Reasonable Reasons to Wait.

However, while the stated mission of AFL has been unchanged, in recent years the policies undergirding AFL's mission have been under attack by the Clinton administration and thus the program's laudable characteristics have been compromised.

For example, the Clinton administration placed Felicia Hance Stewart, a former Planned Parenthood abortionist and long-time advocate of contraception, in charge of the Office of Population Affairs, which oversees not only title X, the Federal family planning program, but also AFL, the abstinence program. Clearly, Dr. Stewart and the Clinton administration do not subscribe to the abstinence-centered philosophy, and their efforts to undercut and even defund AFL are well established.

As you will recall, the Clinton administration sought to completely defund AFL for fiscal year 1995 and replace it with a new

Office of Adolescent Health, which would be dedicated to more comprehensive health education and contraceptive information and services to teens.

That this administration would consider eliminating the only source of Federal funding for teen abstinence and adoption programs in favor of more contraceptive programs, which already receive some \$450 million every year through title X, Medicaid, and the maternal and child health block grants, among other funding streams, clearly demonstrates not only the administration's lack of support for abstinence programs, but its outright hostility toward the existence of such programs.

Although the Clinton administration did not succeed in its attempt to defund the AFL program, it has since engaged in other tactics which undermine the program's promotion of the true abstinence-centered message. For example, this administration's Health and Human Services Department modified the policy regulations regarding AFL grant applications. Printed in the Federal Register, this administration's policy guidelines omit all references to parents' central role and indeed even subvert AFL's core purpose of promoting abstinence-centered programs by soliciting grant applications from contraceptive-based programs.

Please allow me to delineate this point a little further. During the Bush administration, the Federal Register announcing AFL grant applications stated the following:

Applications requesting support for prevention projects should propose innovative, value-based, family-centered approaches to promoting adolescent premarital abstinence. Applicants should promote parents as the primary sex educators of their children and emphasize the provision of support by other family members, voluntary associations, religious and charitable organizations, and other groups in the private sector in order to help adolescents and their families deal with complex issues of adolescent premarital sexual relations.

Under the Clinton administration, however, the policy guidelines regulating the AFL program differed dramatically. The December 22, 1994, Federal Register stated the following:

The Office of Adolescent Pregnancy Programs encourages the submission of prevention applications which propose to do the following: No. 4, include medically accurate information on sexuality, contraception, sexually transmitted diseases, and HIV-AIDS;

No. 5, Offer educational services to parents to assist them in communicating with their children about sexuality, contraception, STD's, and HIV-AIDS.

Mr. Chairman, as you can see from this example, this administration believes that parents are not the primary sex educators of their children, but that the educational establishment must help parents teach their children about sex. This administration also believes that AFL should not be a true abstinence program, but a contraceptive-based program.

This double message about sex not only contradicts the AFL program's stated mission, it also harms children in the process. Therefore, Mr. Chairman, if the AFL program is to continue, with or without increased funding, it is vitally important that the language of the legislation be altered to reflect a true abstinence-centered and adoption-promoting message. We must prevent the current and future administrations from wrongly interpreting the AFL statute.

The Family Research Council proposes that this committee take into consideration the Faircloth-Talent abstinence language passed

within H.R. 4, the recent welfare bill that was vetoed by the President. Under such explicit language, only true abstinence-centered programs would be able to receive funding. We believe that this legislative step is necessary in order to remedy the executive branch's tampering with the program.

Unless such a step is taken, Family Research Council cannot endorse the expansion of a program that is so vulnerable to be used for harmful purposes.

Finally, I would like to comment on the Family Research Council's viewpoint regarding the Government's role in funding social programs which seek to promote any form of sexual behavior. FRC strongly believes that the responsibility for sex education belongs to the parents of children. We also believe that the Federal Government does not have a legitimate role in federally subsidizing contraceptive programs or even abstinence programs.

Indeed, we have only advocated the existence of AFL in order to counter the Federal Government's aggressive role in promoting contraceptive-based programs.

PREPARED STATEMENT

Therefore, if the Government is to play any role at all, it should at a minimum sustain and promote self-restraint and marital commitment, rather than subverting them.

Mr. Chairman, we ask that you would take FRC's recommendations under consideration. Thank you very much.

Senator SPECTER. Thank you very much, Ms. Hsu. We appreciate your comments.

[The statement follows:]

PREPARED STATEMENT OF GRACIE S. HSU

Thank you, Mr. Chairman. As you are well aware, the Family Research Council (FRC) has long been an advocate of pre-marital sexual abstinence and of saving sex for its proper context within marriage. We also strongly encourage adoption as a superior alternative to abortion.

In the past, the Family Research Council has also supported the Adolescent Family Life (AFL) Act, or Title XX of the Public Health Service Act, because it has historically been a solid abstinence-centered and adoption-promoting program. Indeed, the AFL legislation was crafted in order to sponsor programs and research projects which promote society's traditional sexual ethic of abstinence until marriage. The AFL Act articulates a compelling moral framework for reversing the tide of adolescent promiscuity, out-of-wedlock pregnancy and abortion, for it recognizes the fact that sex is not simply a physical act, but that it also has moral, emotional, and social consequences.

The two primary purposes of AFL are:

(1) To find effective means, within the context of the family, of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members, and to promote self-discipline and other prudent approaches to the problem of adolescent premarital sexual relations, including adolescent pregnancy; and

(2) To promote adoption as an alternative for adolescent parents (Sec. 2001(b), (1) and (2) of the Public Health Service Act).

For years, AFL has stood alone in a sea of contraceptive funding, promoting prevention rather than simply risk reduction. And, even with its limited annual budget of about \$7 million, AFL has succeeded in helping young people choose the healthiest lifestyle of pre-marital sexual abstinence. Some AFL program successes include *Teen-Aid*, *Choosing the Best*, *The Art of Loving Well*, and *Reasonable Reasons to Wait*.

However, while the stated mission of AFL has remained unchanged, in recent years, the policies undergirding AFL's mission have been under attack by the Clin-

ton Administration, and thus, the program's laudable characteristics have been compromised somewhat.

For example, the Clinton Administration placed Felicia Hance Stewart, a former Planned Parenthood abortionist and long-time advocate of contraception, in charge of the Office of Population Affairs which oversees not only Title X, the federal family planning program, but also AFL, the abstinence program. Clearly, Dr. Stewart and the Clinton Administration do not subscribe to an abstinence-centered philosophy, and their efforts to undercut and even defund AFL are well-established.

As you will recall, the Clinton Administration sought to completely defund AFL for fiscal year 1995 and replace it with a new Office of Adolescent Health which would be dedicated to more "comprehensive" health education and contraceptive information and services to teens. That this Administration would consider eliminating the only source of federal funding for teen abstinence and adoption programs in favor of more contraceptive programs which already receive some \$450 million every year through Title X, Medicaid, and the Maternal and Child Health Block Grant, among others funding streams, clearly demonstrates not only the Administration's lack of support for abstinence programs, but its outright hostility towards the existence of such programs.

Although the Clinton Administration did not succeed in its attempt to defund the AFL program, it has since engaged in other tactics which undermine the program's promotion of a true abstinence-centered message.

For example, this Administration's Health and Human Services Department modified the policy regulations regarding AFL grant applications. Printed in the Federal Register, this Administration's policy guidelines omit all references to parents' central role and, indeed, even subvert AFL's core purpose of promoting abstinence-centered programs by soliciting grant applications from contraceptive-based projects.

Please allow me to delineate this point further. During the Bush Administration, the Federal Register announcing AFL grant applications stated the following:

"Applications requesting support for prevention projects should propose innovative, value-based, family-centered approaches to promoting adolescent premarital abstinence. Applicants should promote parents as the primary sex educators of their children and emphasize the provision of support by other family members, voluntary associations, religious and charitable organizations and other groups in the private sector in order to help adolescents and their families deal with complex issues of adolescent premarital sexual relations." (Federal Register, Vol. 57, No. 19, January 29, 1992)

Under the Clinton Administration, however, the policy guidelines regulating the AFL program differed dramatically. The December 22, 1994 Federal Register stated the following:

"The OAPP encourages the submission of prevention applications which propose to do the following: . . . (4) include medically accurate information on sexuality, contraception, sexually-transmitted diseases (STD's) and HIV/AIDS, (5) offer educational services to parents to assist them in communicating with their children about sexuality, contraception, STD's and HIV/AIDS . . ."

Mr. Chairman, as you can see from this example, this Administration believes that parents are not the primary sex educators of their children, but that the educational establishment must help parents teach their children about sex. This Administration also believes that AFL should not be a true abstinence program, but a contraceptive-based program. This double message about sex not only contradicts the AFL program's stated mission, it also harms children in the process.

Therefore, Mr. Chairman, if the AFL program is to continue, with or without increased funding, it is vitally important that the language of the legislation be altered to reflect a true abstinence-centered and adoption-promoting message. We must prevent the current and future Administrations from wrongly interpreting the AFL statute.

The Family Research Council proposes that this Committee take into consideration the Faircloth-Talent abstinence language passed within HR 4, the recent welfare bill that was vetoed by the President. Under such explicit language, only true abstinence-centered programs would be able to receive funding. We believe that this legislative step is necessary in order to remedy the executive branch's tampering with the program. Unless such a step is taken, however, FRC cannot endorse the expansion of a program that is so vulnerable to be used for harmful purposes.

Finally, I'd like to comment on the Family Research Council's viewpoint regarding the government's role in funding social programs which seek to promote any form of sexual behavior. FRC strongly believes that the responsibility for sex education belongs to the parents of children. We also believe that the federal government does not have a legitimate role in federally subsidizing contraceptive programs, or even

abstinence programs. Indeed, we have only advocated for the existence of AFL in order to counter the federal government's aggressive role in promoting contraceptive-based programs. Therefore, if the government is to play a role at all, it should at a minimum sustain and promote self-restraint and marital commitment rather than subverting them.

Mr. Chairman, we ask that you would take FRC's recommendations under consideration. Thank you very much.

STATEMENT OF KATHLEEN M. SULLIVAN, DIRECTOR, PROJECT REALITY

Senator SPECTER. We turn now to Ms. Kathleen Sullivan of Project Reality. Thank you for joining us, Ms. Sullivan, and the floor is yours.

Ms. SULLIVAN. Thank you very much for this opportunity. As one who participated in title XX programs back from 1985-91, I do appreciate and commend your interest in the whole area. You are one of the few that really have picked up on it, and I am very appreciative and I am glad for this opportunity to be able to show you how well it is working in the field.

In our experience of working in and studying the area of adolescent health, both emotional and physical, for the past 10 years, we have observed some very notable changes. First of all, the problems associated with adolescents becoming sexually involved have been compounded and have become a major public health cost and concern in areas other than pregnancy, such as rampant sexually transmitted disease and severe emotional trauma. These facts are ignored by the majority of programs that are out there and in use to date.

Second, abstinence-centered education, the only true solution, which was thought impossible 10 years ago, has been exceptionally well received by tens of thousands of students who have had the opportunity to participate in this innovative and sensible approach. Today abstinence education is a national debate and organizations such as Project Reality and others like Teen-Aid of Spokane, WA, which have developed true abstinence-centered materials can show statistically that it works very well.

For 25 years public policy programs and funding have been concentrated under the category or heading of teen pregnancy. Maybe it is time we reconsider the very concept of this category. When we speak about teen pregnancy, the perception is that it is a female problem, and in reality we know that is not true. It is not limited to just females.

Pregnancy is not the problem. Becoming sexually involved is the problem. Pregnancy is only one factor, a result of the real problem. Promiscuity's three paramount consequences—emotional trauma, sexually transmitted disease, and pregnancy—must each be seriously and adequately addressed. Most discussions and programs to date focus on teen pregnancy, ignoring the consequences of the emotional trauma.

Sex is a physical act, but the whole person is involved—the heart, the mind, and the body. Thus when the physical relationship terminates the emotional pain due to rejection, depression, stress, loneliness, endures. These consequences do not only pertain to the female, but to the male as well.

The emotional factor can be summed up in our slogan—and I was amazed to hear Mr. Devlin refer to it, though I have never met

him and did not even know about his program. But this is our slogan, and this is the most incredible message and poster to evoke conversations in the classroom, because the boys know this is true every bit as much as the girls.

Senator SPECTER. May the record show that the chart says "Condoms do not protect the heart." Our record will not show that, Ms. Sullivan, unless I interrupt you for just a minute.

Ms. SULLIVAN. Thank you very much.

The emotional and physical health of our youth must be reclaimed, and this can only be accomplished by way of abstinence-centered education. One comment eloquently sums up the 90-percent positive comments we have received over 10 years of evaluation: I did not know I did not have to do it. Because that is the message our young people have been receiving from our culture.

This proves that we need to provide the youth with the type of education which, if practiced, is risk-free and ensures the safety of their health. Excluding all programs other than abstinence-centered simply does not do the job. My emphasis on the emotional factor is to ask that policies and funding be redirected to address prevention of the real problem, adolescent sexual involvement prior to marriage, rather than continuing programs that address just one of the fallout factors.

Besides the emotional trauma suffered by young girls and boys, we are faced with an extraordinary increase in sexually transmitted diseases. There are cancerous conditions resulting from HPV and antibiotic-resistant STD's seriously affecting the health of the teen population. Consider this cost to our future generation and the cost in dollars of health care.

We should redefine the topic in school courses as adolescent health, emotional and physical, not just teen pregnancy problems. This attracts not only the attention of both male and female students, but provides the wider approach to their thinking and understanding of self-control and responsibility in all areas of their life.

Abstinence education does work. In 10 years of extensive evaluation, we have collected a treasure of data. Over 65,000 students have been evaluated thus far, and we are about to have the first longitudinal study results due the end of this month. Attached is a summary for the record, a summary showing that even the at-risk students respond to the abstinence-centered message.

One of the questions we ask, Can sexual urges be controlled? Only 4 to 5 percent of them say never, and that tells us that these students instinctively know that this is something that can be controlled.

Senator SPECTER. What did you say there, Ms. Sullivan? Only 4 to 5 percent say what?

Ms. SULLIVAN. We ask the question, Can sexual urges be controlled, and the choices are always, sometimes, I don't know, or never. Only 4 to 5 percent of them—and it's constant for the 10 years—respond never. What that brought out, and we have discussed it for 8 years now, the kids know instinctively this is something that can be controlled. What they want to know is, why should I control it and how do I control it. And that is the key to really getting their attention.

This is where the true abstinence-centered program can result in building a commitment to adopt abstinence as the healthiest lifestyle.

For several years Project Reality has conducted a study at three levels of abstinence education in Illinois, funded by the Illinois Department of Public Aid and supported by Governor Jim Thompson and Governor Jim Edgar. A summary of our current year's operation showing the three different levels: We covered 23,000 students last year. We are in 88 schools in the city of Chicago, and you will see from this chart, covering every single neighborhood of Chicago. There were over 13,000 students in this program in the city.

Fortunately, the State of Illinois has seen fit to increase the funding tremendously. We will be able to double our operation of our pilot programs in Illinois for the coming year.

PREPARED STATEMENT

It is the one solution to rebuilding the respect for each individual, including their sexuality, and directing our young people to complete adulthood. And you are right, it is the one issue area that there is almost unanimous agreement.

In summary, we strongly recommend that Congress redirect policies and funding to address the best preventive medicine possible, abstinence-centered education.

[The statement follows:]

PREPARED STATEMENT OF KATHLEEN M. SULLIVAN

In our experience of working in and studying the area of adolescent health, both emotional and physical, for the past ten years, we have observed notable changes:

A. The problems associated with adolescents becoming sexually involved have been compounded and have become a major public health cost and concern in areas other than pregnancy, e.g. rampant sexually-transmitted diseases and severe emotional trauma, these facts are ignored by the majority of programs provided today.

B. Abstinence-centered education, the only true solution, which was thought impossible ten years ago, has been exceptionally well-received by tens of thousands of students who have had the opportunity to participate in this innovative, and sensible approach.

Today, abstinence education is a national debate and organizations, such as Project Reality and others, like Teen Aid of Spokane, WA, which have developed true abstinence-centered materials, can show statistically that it works very well.

This national debate needs to be expanded and we commend you for taking a leadership role, as the House Ways and Means Committee has done, in holding these hearings.

For 25 years, public policy programs and funding have been concentrated under the category, or heading, of "Teen Pregnancy." Maybe it is time we reconsider the very concept of this category. When we speak about "teen pregnancy," the perception is that it is a female problem and, in reality, we know that is not accurate.

Pregnancy is not the problem. Becoming sexually involved is the problem. Pregnancy is only one factor, or result, of the real problem, Sexual Activity. Promiscuity's three paramount consequences, emotional trauma, sexually-transmitted diseases, and pregnancy, must each be seriously and adequately addressed.

Most discussions and programs to date focus on teen pregnancy, ignoring the consequences of emotional trauma. Sex is a physical act, but the whole person is involved, heart, mind and body. Thus, when the physical relationship terminates, the emotional pain due to rejection, depression, stress and loneliness endures. These consequences do not only pertain to the female, but to the male as well. The emotional factor can be summed up in our slogan: "Condoms don't protect the heart."

The emotional and physical health of our youth must be reclaimed, and this can only be accomplished by way of an abstinence-centered education. One comment eloquently sums up the 90 percent positive comments received over the past 10 years of evaluations: "I didn't know I didn't have to do it." This proves that we need to

provide the youth with the type of education, which if practiced, is risk-free and ensures the safety of their health, thereby excluding all programs except for those which are abstinence-centered.

My emphasis on the emotional factor is to ask that policy and funding be redirected to address prevention of the real problem, adolescent sexual involvement prior to marriage, rather than only continuing programs that address just one of the fallout results, pregnancy.

Besides the emotional trauma suffered by our young girls and boys, we are faced with an extraordinary increase in Sexually Transmitted Diseases. The Associated Press recently proclaimed that "teenagers are contracting the AID virus at an average of more than one an hour." Then there's a new disease, Chlamydia, causing sterility in early adulthood. There are cancerous conditions resulting from HPV, and "antibiotic resistant STD's" seriously affecting the health of the teen population. Consider this cost to our future generations and the cost in dollars for health care.

We should redefine the topic and school courses as Adolescent Health—Emotional/Physical. This attracts not only the attention of both male and female students but provides the wider approach to their thinking and understanding of self-control and responsibility in all areas of their life.

Abstinence Education works! In ten years of extensive evaluation, we have collected a treasure of data. Attached is a summary showing how even the "at risk" students respond to our abstinence-centered message. One of the questions we ask is: "Can sexual urges be controlled?" Only 4 to 5 percent answer: "Never." This very low negative response was tallied early in 1986 and has remained constant.

What this tells us is: Adolescents know instinctively that sexual emotions are something that can be controlled. What they want to know is "WHY should I control them?" and "HOW do I control them?"

This is where a true Abstinence-centered program can result in building a commitment to adopt abstinence as THE healthiest lifestyle.

For several years Project Reality has conducted a study in three levels of abstinence education in Illinois, funded by Illinois Department of Public Aid and supported by Governor Jim Edgar. A summary of our current year's operation is attached. This approach is not just a theoretical idea, but a proven approach that is realistic and cost effective. It is the one real solution to rebuilding the respect for each individual, including their sexuality, and directing our young people to complete adulthood.

In summary, we strongly recommend that Congress redirects policies and funding to address the best preventative medicine possible: Abstinence-Centered Education.

ABSTINENCE EVALUATION REPORT 1994-95

SUMMARY

Evaluations for two levels of abstinence education pilot programs, conducted during the 94-95 school year by Project Reality, show remarkable results even with hard to reach students. A third division, exclusively for City of Chicago schools, is a two part presentation that is evoking great attention from administrators, for the students are also showing intense interest as evidenced by their evaluation.

Project Reality administers an extensive questionnaire with the eight-unit *Choosing the Best* (middle school) and 15 unit *Facing Reality* (high school). Data collected demonstrates for the second year in a row, that both these programs have a significant impact at reducing at-risk, permissive attitudes in all sub groups of students. In fact, the at-risk category experienced the greatest degree of attitude change towards recognizing abstinence as the healthiest lifestyle.

The analysis demonstrated that members of these high-risk groups entered the *Choosing the Best* and *Facing Reality* programs with significantly more permissive attitudes about sex than those at lower risk. This evaluation also demonstrated that *Choosing the Best* and *Facing Reality* are successful in not only changing the attitudes of low risk students, but are even more successful in changing the attitudes of high-risk students. This seems to counter the criticism that programs which focus on abstinence are ineffective with students who are high-risk.

Comparison for the pre-test to post-test gain in "attitude scale" for Virgins vs. Non-Virgins: *Choosing the Best*: Virgins, Gain 4.7; Non-Virgins, Gain 5.9. *Facing Reality*: Virgins, Gain 3.8; Non-Virgins, Gain 4.5.

"Attitude scale" is based on a 21-item scale with a reliability coefficient (alpha) above .9. These changes, based on an alpha that high, mean it is a very "real" change.

The evaluation analysis was conducted by Northwestern University School of Medicine Department of Psychology.

BACKGROUND

Project Reality received a grant from the Illinois Dept. of Public Aid to administer these programs for schools throughout Illinois. The middle school level, *Choosing the Best*, was presented in 65 schools and had over 5,800 students matched with the pre/post test. *Facing Reality* had eleven schools with 1,070 matched evaluations. The participants were evenly divided by gender and comprised a cross section of socio-economic as well as multi-cultural backgrounds.

ANALYSIS DISCUSSION

These evaluations identified the following groups of students that were at higher risk of being sexually active than their peers: students who did not have two parents in the home; those who perceived parental approval of teen sex; those who smoked; and those who had been drunk.

It was demonstrated that there was a definite link between attitudes and behavior (non-virgins had significantly lower scores at pre-test than did virgins). There were also demonstrated links between the four identified risk factors and sexual behavior, as well as links between the risk factors and attitudes. It is reasonable to expect that if *Choosing the Best* and *Facing Reality* lead to these real, demonstrated changes in attitudes, especially among those most at risk, they also lead to changes in behavior.

Comparison of the pre/post test gain in attitude scale scores for high-risk vs. low-risk kids in each of the 4 risk factors:

	Choosing the Best		Facing Reality	
	High-risk gain (percent)	Low-risk gain (percent)	High-risk gain (percent)	Low-risk gain (percent)
A. In a 2-parent home	5.4	4.8	3.9	4.0
B. Parent approval of teen sex	6.3	4.5	5.0	3.6
C. Having ever smoked	5.3	4.6	4.5	3.4
D. Having ever been drunk	5.3	4.7	5.0	3.1

This data is highly encouraging. A one year follow-up evaluation measuring whether corresponding behavior changes have, in fact, occurred is in progress. A detailed summary of the Evaluation Report is available.

THANKS FOR ABSTINENCE EDUCATION

LETTER FROM AN 8TH GRADE BOY IN CHICAGO PUB. S.

February 6, 1996.

Sex. Sex is a precious gift that everyone will one day most likely experience. It isn't something to rush into. The first time should be special and worth waiting for. If you have sex before you're married, it is something useless. If the person you give yourself to runs out on you, they have a part of you that you can never get back.

Abstinence is something I vow to have until my wife comes along. I will save myself for her and only her. Hopefully she'll do the same for me, Whoever she is.

Today's pressures can really bug you. They say: "Everyone is doing it." Well that's what they think. I am different. I'm someone who chooses to just wait. If one day I have a girlfriend, and she wants to have sex with me, she'll respect me when I say no. Love isn't just based on sex. Love is a relationship between two people that should be kept alive until the day of marriage. If someone loves me just for sex, they have something coming. I am the type of person that will stand firm behind what I believe. "Just wait." Those are the two words that lots of people forget to say.

I'm a present. I'm wrapped up and I have something special inside of me. If I let someone open it too soon, when marriage comes along, there will be nothing for my wife to say she got to open. My virginity is something for my wife, my partner for life. My motto: "Just Wait."

May 11, 1995.

Today Mrs. Olson, a nurse, came to talk to us about sexual abstinence. She talked about STD's and pregnancy.

But she also talked about something I never really thought of: hurt, and your feelings when you have sex.

She also talked about love and sex. I never realized how different they can be. Sex is just sex. It can be done without love. Love is when someone cares about you, and talks to you.

I've known all along the after you have sex with your boyfriend you can't go back to just holding hands with him. Ms. Olson taught us about abstinence and she demonstrated with the tape that two abstinent people who got married can probably last longer than two people who have had a lot of sexual partners.

Not too long ago I was actually thinking of becoming sexually active with this one guy.

But just after listening to Mrs. Olson for one hour I want to save myself for my husband.

It's not pregnancy or STD's that are stopping me from doing "it". Well, it's part of the reason, but most of the reason is that I don't want to end up getting hurt by my boyfriend. And when I do "it" with my husband I want "it" to be special.

[From the Chicago Sunday Sun-Times, May 26, 1996]

ABSOLUTE ABSTINENCE

(By Dennis Byrne)

Something shocking is going on in scores of Chicago public schools.

They're teaching the kids to be sexually abstinent.

Not abstinent, as in: "You shouldn't do it, but if you must, be careful and use a condom."

I mean abstinent as in: "Don't do it. Period."

This kind of good advice will not be tolerated by give-the-kids-free-condoms crowd, who will attack the abstinence classes for their old fogyism and for the high crime of trying to teach kids some sense.

And here's something else that will shock and surprise: Illinois law requires that abstinence be taught in schools. The school code mandates that abstinence be taught not just as an offhanded alternative to birth control, but "emphasized" as the "expected norm." The law, which requires that "comprehensive health education programs include instruction on sexual abstinence until marriage," has been on the books since 1989, but it has been kept almost as secret as the PIN number for the Pentagon's petty cash fund.

One group filling that mandate is the Abstinence Education Program, a project of the Southwest Parents Committee, a private, nonsectarian group. Already involved in parenting and other educational efforts, "we saw the need for junior high and high school students to get another view [of sexuality]," said the program's director, Dr. Marcella V. Meyer. Starting with about 10 schools in 1986, the program has grown to 83 schools this year, including Lane Tech, Clemente and Senn high schools.

Some kids are disappointed when they find out they're not getting free condoms, she said. But an independent evaluation by a Northern Illinois professor indicates a positive improvement in many children's attitudes after taking the two-session course, led by married couples. Increased numbers of students think it is possible, normal and healthy to wait for marriage to have sex. And fewer agree that having sex before marriage is all right as long as the girl doesn't become pregnant.

"They listen; that's the most important thing," said Meyer, who noted that many children get as far as junior high or high school without ever hearing the message that it is acceptable, even advisable, to avoid a sexual relationship at that young age.

This, she believes, is not a message being heard in many other Chicago schools. She said instruction materials used by another sex education group active in the Chicago schools contained seven pages on contraceptive techniques, eight pages on abortion methods and only one sentence on abstinence. It was a kiss-off, saying something about abstinence being a "traditional" (read: old-fashioned) method of birth control.

One more thing about this program that will surprise (or outrage) some people: Most of its cost, about \$80,000, comes from state funds earmarked to combat teen

pregnancy. The money is funneled through Project Reality, an abstinence advocacy group based in north suburban Golf

Kathleen Sullivan, Project Reality's director, said students exposed to such programs typically wonder afterward why "nobody ever told us this before." Traditional sex education programs, she said, are so focused on promoting contraception that they spend relatively little time dealing with the medical, and especially the emotional, problems of early sexual activity. Sullivan says her group is finding that 13-, 14- and 15-year-old sexually active boys can be as emotionally hurt as girls. When the more-mature girls break off the physical relationship (they are usually the ones to do so, often to date older boys), the boys tend to internalize their hurt, taking on a macholike silence. The pent-up emotional hurt, she believes, contributes to many of the later and growing cases of sexual abuse and harassment.

An interesting point. It makes you wonder whether those who march on big corporations, demanding an end to alleged sexual harassment, will take it to heart, and inquire about what's being taught in school.

ILLINOIS PILOT SCHOOLS 1995-96

Project Reality has been a pioneer in the national field of adolescent health education. It has been teaching and evaluating abstinence-centered programs in the public schools since 1985.

For the current school year, 1995-96, Project Reality is administering a program with three divisions under a grant funded by the State of Illinois Department of Public Aid.

Two of these divisions have sites throughout the State. The third is concentrated in the City of Chicago.

Project Reality provides teacher training seminars for all three divisions. We also conduct an extensive evaluation through a pre-post survey of 69 questions in both high school and middle school programs. The analyses for these two divisions is done by Northwestern University School of Medicine, Psychology Department. The Chicago City program (which is more compact) has a 10 question survey (pre-post) and is analyzed by Dr. William C. McCready, Northern Illinois University.

The three divisions and a brief description are as follows:

Statewide:

Senior High School, Facing Reality, Grades 9-11, 15 units.—A composite approach, abstinence towards drugs, alcohol and sexual activity. Instruction and questionnaire administration by in-school faculty. Students: 3,000.

Middle School, Choosing the Best, Grades 7-9, 8 units.—Strong medical emphasis concentrates on sexual abstinence. Includes eighteen slides, from the Medical Institute for Sexual Health, and two videos. Is appropriate for AIDS education. Instruction and questionnaire administration by in-school faculty. Students: 11,000.

Chicago Division: 100 Schools

City of Chicago, Southwest Parents Committee Division.—A two-part series presented by a seven member team, whose credentials include medical, educational and bi-lingual training. The evaluations are administered by school faculty before and after abstinence presentations. Students: 12,000.

Southwest Parents, started with 11 schools five years ago, served 88 schools last year with 925 presentations.

Total Students served in fiscal year 1995: 23,000.

[CLERK'S NOTE.—The document entitled "Choosing the Best" could not be printed in the record but is available for review in the subcommittee's files.]

DISAGREEMENT ABOUT THE DESIRABILITY OF ABSTINENCE

Senator SPECTER. Ms. Sullivan, just one interrupting question. You say almost unanimously agreed upon. Is there any disagreement about the desirability of abstinence?

Ms. SULLIVAN. Unfortunately, yes. And in the years that I have been talking to different people and have watched it, which is 11 years now, where at the beginning it was ridiculed, that it is just impossible, it will not work, the kids will not listen, and in fact I have been the victim, you might say, of personal attacks as well

as legal challenges in court. I was amazed to find myself sitting in Shreveport, LA, on Superbowl Sunday defending abstinence education in a lawsuit.

However, that has changed. Today everyone is discussing it and it is now being recognized as the most reasonable solution.

Senator SPECTER. Well, does anybody disagree with its desirability?

Ms. SULLIVAN. They will not say they agree or disagree with the desirability, but there seems to be disagreement or resistance from those who are operating the current programs. From our point of view, I would like to bring out the fact that for a long time, 25 years, a certain philosophical mind has had a monopoly on public-funded programs, and they have been the double message, the contraceptive approach.

I think it has been developed or defended by those who have had a real give-up-itis approach to our young people.

Senator SPECTER. What kind?

Ms. SULLIVAN. Give-up-itis. They just did not believe it could be possible.

Senator SPECTER. And what was the basis for the legal challenge, the lawsuit in which you were involved?

Ms. SULLIVAN. In Shreveport we had two texts under use in Shreveport, "Facing Reality" and "Sex Respect," and they were challenged on three or four different grounds, one being that in teaching abstinence you were teaching religion. And that was pretty much thrown out completely. They challenged some of the medical facts mentioned and most of that. In "Facing Reality," all of censored parts were reinstated except 15 lines.

It was unfortunate, but in a way I am glad it happened, because it has helped to bring out the whole debate.

Senator SPECTER. As I noted earlier, we were joined by Dr. Henry Foster. I had not known Dr. Foster was coming, nor staff had known, but we are complimented you are here. Dr. Foster, I think we will be enriched by hearing from you.

Among Dr. Foster's many attributes and experiences, he served for 5 years with the Robert Wood Johnson Foundation on services for high-risk young people, and from that program he conceptualized and developed the I Have a Future program to reduce teen pregnancy, which was recognized by President George Bush in 1991 as one of the Nation's Thousand Points of Light.

Dr. Foster, we would be pleased to hear from you.

STATEMENT OF HENRY W. FOSTER, M.D.

Dr. FOSTER. Thank you very much, Senator Specter. I had not come to do that, but I am happy to have the opportunity. And I think everyone on the panel has spoken already.

First of all, I want to congratulate you, Senator, for convening this, and the panel members. There has been an evolution with respect to the place and position of abstinence in dealing with our young people. It has evolved positively.

I am in an ambivalent situation for several reasons and I hope I can get you to understand what affects or creates that ambivalence. If I am hearing abstinence only, as someone in the field, that is not workable for me, only. Abstinence first. I cannot tell you

what the difference is, but there is a difference between a 13-year-old and a 19-year-old, both of whom are teenagers.

Our program made me feel happier than anything when on national television one of our 17-year-old men in the I Have a Future program told Vice President Gore that being abstinent is cool. This is the kind of message that we are trying to bring about. It is abstinence first. We have done everything—and any program who deals with adolescents must start out that you have to accept the fact that being sexually active as an adolescent cannot be the norm, it absolutely cannot, for all of the social, emotional, economical reasons. When one participates in acts that can create new human beings, one has a responsibility to be able to meet the requirements of that new person.

However, that fails. And I will only bring out two additional points. You have a writer in this community named Leon Dash. He is a writer for the Washington Post. He went into Anacostia about 5 years ago and lived incognito for a bit over 1 year. He came back, he wrote a 6-day series which appeared in the Washington Post. It won him a Pulitzer Prize, and he has subsequently written a book.

But the upshot and the thing that started me with the whole I Have a Future program is after over 1 year living in this community he came out frightened and he frightened me. He pointed out that there were girls 12, 13, 14, and 15 trying to become pregnant, when even the men do not want them to be pregnant. That was frightening.

I was talking to the chairman of the department of psychiatry in one of our leading eastern medical schools and I was recounting this to him, Dash's work. I will never forget what he told me and it made a real impression. He said: Hank, if you have lived your entire life in urban slums or rural squalor and see nothing beyond that as reasonable, it is good mental health to want to have a baby.

I concluded that this is not an indictment of the 12- or 13-year-old who is trying to get pregnant. It is an indictment of us as a society when we allow 12- and 13-year-olds to see no future for them beyond having a baby, which is what spawned my idea of I Have a Future.

What were my children doing when they were that age, is what I asked. They were doing everything. They were learning about the world. So this is what we have done with the I Have a Future program. From the inner city of Nashville, we have over 50 of these kids who have gone to college. We have had over 1,000.

And my concluding note is this: We have the perfect capstone to this Carnegie-funded demonstration program. It has now been institutionalized by the Nashville Metropolitan Health Department. It has taken it over. It is expanding it to two additional housing projects and it is receiving State funding. To me, this is the full cycle.

Thank you.

Senator SPECTER. Thank you very much, Dr. Foster.

I want to acknowledge the contribution of Senator Jeremiah Denton on this program, who was a champion when he was here in the Senate. Senator Denton was elected in 1980 when I was elected, and I worked with him closely. We were on the Judiciary Committee together. When he left he said: Arlen, will you take this pro-

gram for funding under your wing. And I have in the tenure that I have been on the Appropriations Subcommittee for this program.

But Senator Denton was a champion and I think his contribution should be acknowledged, and I want to thank him for that.

Let me begin with a major controversial question, and that is, for those who contend that there has to be some availability of condoms at some point—and I frankly disagree with that, and I believe that the program ought to be directed to abstinence specifically, that this is a specially designed program and that is where the effort ought to be on the funding of this program.

But I have had many people come to me and have said: You are being unrealistic, that it is not a sufficient answer, that somewhere there has to be the option. And I announce my prejudices at the start, but I think that is something that is very much in the field and very much has to be confronted.

Now let me begin with you, Ms. Sullivan, on your statistic of only 5 percent say that the sexual urge cannot be controlled. How would you deal with those who say that there will be some, and if there are only 4 or 5 percent where the sexual urge cannot be controlled that there should be some alternative, the condom as they articulate it?

Ms. SULLIVAN. Senator, we run into that all the time, and we have found the teachers—let me just give you an anecdotal situation which I think puts it in a nutshell. One coach early on, about 6 or 7 years ago, he brought up the fact, he said: We really are telling them then to be equipped for sex, just in case, when you give them, abstinence is fine, but.

When it comes to the Friday night and they are out and they have had a couple beers or they are in the heat of the moment, if they are equipped for sex then the double message flips in: Well, yeah, it would be best not to, but they really did not expect me not to do it.

So if they have gone to the effort of becoming equipped for it by either going on the pill, buying the condoms, getting whatever is necessary, and it is available, they are going to try and use it. They are much more likely to try it. And the disaster is that most of them in the heat of the moment, passion, whatever, or under the influence of alcohol or drugs, they do not use it properly, they do not use it consistently. I think Dr. Hager can show the failure rate among teenagers is way higher than the average rate, for one thing.

But see, none of that really takes care of that emotional situation. So the way we present it is that it is the manner in which you talk about contraceptives, and I think this may be where Dr. Foster and I would come at it from different angles. If indeed—there is no such thing as abstinence only. I do not think that is an accurate way of referring to any of the programs I am aware of.

You might note that I talk about abstinence-centered, because the emphasis is on all the positive healthy reasons.

Senator SPECTER. Well, when you say there is no such thing as abstinence only, are you suggesting there is some opening for something other than abstinence?

Ms. SULLIVAN. All programs talk and discuss contraceptives. The reference to abstinence only is I think some of our opponents, for

instance, would say: You say only abstinence and you do not discuss contraceptives. We do discuss contraceptives.

Senator SPECTER. Do you?

Ms. SULLIVAN. Oh, yes.

Senator SPECTER. When you discuss them, then does that not open the alternative?

Ms. SULLIVAN. No; because the manner in which it is presented is what makes the difference.

Senator SPECTER. How is that?

Ms. SULLIVAN. Because if it is presented in a positive promotional way of here is where to get them, how to use them, and demonstrated and so on—

Senator SPECTER. How do you discuss them?

Ms. SULLIVAN. We do not demonstrate, for one thing. We talk about it and here are all the failure rates of the different contraceptives. And the emphasis is really on: not one contraceptive will stop the emotional trauma. For instance, an exercise in Facing Reality which evolved from a classroom situation, we have the kids put on the board all the different things that might happen as a result of being sexually involved, and they came up with 42 different items.

Then the teacher will say: Now, which of these can be eliminated, completely eliminated, by using any form of contraception? And right away, of course, they will say, oh, pregnancy. Wait a minute, we say eliminated, not just reduced, but completely eliminated. And it turns out none of them can be, because even if it is 2 percent, 3 percent, 1 percent, it is not a complete elimination. That gets the message across.

Now, when it comes to actually making condoms available, let's face it, they are there on every shelf in every drugstore, in every grocery store. They are all over the place. Do we need to have it in the school? Because we do not give them the drug paraphernalia in the school because some kids, 1 percent maybe, are going to take drugs anyway.

Senator SPECTER. Dr. Carlson, let me turn to you and your comment during your opening statement about sex education in the schools, and this picks up—and I am going to turn to Ms. Hsu next—on her statement about it being a parental responsibility. But there is a lot of objection to sex education in schools, but when the articulation is on abstinence as the focus it seems to, if not evaporate, certainly very substantially be reduced.

How do you suggest approaching this issue so that you do not have the objection which we have heard so much about sex education? Or do you agree that if you focus on abstinence you undercut the objection that you hear so much on sex education?

Dr. CARLSON. I think good abstinence programs generate very little parental opposition and very little parental difficulty.

Senator SPECTER. Any that you have heard?

Dr. CARLSON. Very little, and I think Kathleen Sullivan's experience in Chicago is in many ways a model for that. It does reduce the sense of opposition between the school's values and parents' values on balance and on average.

Ideally, I agree with Ms. Hsu, sex education ideally should be focused and conducted in the home, churches, in settings such as

that. Maybe some day that will happen again. Ideally it should not be in the schools.

In our current situation, given the tremendous social and cultural difficulties we are facing in our country right now, given the fact that the schools have moved aggressively into this area or have been pushed aggressively into this area, I think abstinence-based programs particularly will lessen the controversy.

Again, another key to this is full information and involvement of parents in the planning and implementation of the program. One of the virtues of title XX as originally conceived was requiring that kind of involvement from the very beginning, so that there was no mystery, no second message being smuggled in, which I believe we could say has happened many times under title X programs. There has been a public presentation of what was going to be presented, but a second message, a different message, in some ways a radically different message, was being smuggled in behind the backs of the parents.

Senator SPECTER. Under title X?

Dr. CARLSON. Under title X.

Senator SPECTER. And what do you say was that message being smuggled in, as you articulate it?

Dr. CARLSON. That message tended to be one of: sexuality is going to happen anyway and it is best that we simply train the children to be effective contraceptors; we accept teenage sexuality as a given, as something that cannot be changed, and we train them in the methods of sexuality using various chemicals and devices and mechanisms to try to prevent pregnancy.

Senator SPECTER. Ms. Hsu, coming to your point on the desirability of having parents handle sex education, which I certainly would agree with, but would you disagree with Dr. Carlson's final articulation that, while it would be most desirable to have parents do it—and this amplifies a bit on what he said—in many situations there are not parents to do it, you do not have a home where you have the morality, so if there is some guidance in the school program which focuses on abstinence that is a next best, worth doing?

Ms. HSU. We would agree that the parents are the primary sex educators of their children, and if the parents are not available, for example—I think that is why FRC does what we do. We do not simply focus on abstinence. We talk about the family, we talk about the breakdown of family.

Dr. Carlson mentioned things about divorce and fatherlessness. These are things that we also strive to protect, the sanctity of the family, the family unit. So in cases where there is not a family to be involved, we do advocate programs such as Elaine Bennett's Best Friends here in the District, where they become in many senses surrogate parents and they teach them through a lot of the things that parents normally would do. They tell them to stay away from drugs, to stay away from violence, to abstain from sexual activity until marriage.

These are the kinds of things that we think are important in terms of programs. They do not necessarily need to be in the schools. They can be. They can be in churches and community groups.

What we would like to see, though, is if schools do get involved that they would abide by parents' wishes and that they would promote abstinence.

One of the things that we talk a lot about in terms of policy measures and one thing that I think is useful is to talk about sex education as an opt-in program rather than an opt-out program. Currently schools will have sex education programs on their curriculum and most kids will join in and only parents who object will have to take their children out. Instead, we can say parents who are doing just fine at home and want to keep their kids being taught exclusively at home can simply say: OK, well, you simply will not take that class. But parents who think that their children need a class like this can opt their children into the class.

Senator SPECTER. Mr. Devlin, were you surprised to find that Ms. Sullivan had a chart to memorialize and pictorialize your "no condom for the heart" concept?

Mr. DEVLIN. No; in fact, I think——

Senator SPECTER. Was that preplanned, you two?

Mr. DEVLIN. No, no.

Ms. SULLIVAN. I had never heard of him before.

Senator SPECTER. I am sure you had not.

Mr. DEVLIN. No; it was not preplanned. But it sounded good, did it not? It was great.

If you do not mind, with your permission, Senator, I would like to talk about that double message issue as I find it on the street level.

Senator SPECTER. I was just about to ask you to do just that.

Mr. DEVLIN. OK, great, all right. I have actually had a very different experience than Dr. Foster working in Philadelphia. And I might add that I live in the heart of Philadelphia. There are six census tracts that are totally racially integrated in the city and I happen to live in one of them. And my children do go to public school. So we are there as part of the community.

But on the issue of double message, think about what else we tell our teenagers. How would we like it if we said: You can drink and drive; just wear a seatbelt. What hypocrisy. How about: You can smoke a cigarette, but stay away from Lucky Strikes and Camels, choose one that has a filter on it. Or in the antiviolence programs that we work with, how would Mayor Rendell react if we said: Well, we encourage children to use baseball bats and knives instead of semiautomatic weapons.

So there is a definitive dichotomy here where we go in, as I do, into the Daniel Boone High School at 26th and Jefferson in North Philadelphia and as I speak to the young men, as I did there a couple of weeks ago, and Norristown, the alternative schools there, Trenton, NJ, the alternative high schools, and how would these teenagers respond if I came in and I said: Well, we want you to be abstinent, but here is a condom.

This does not wash. If we are going to talk about reality, you know, our children and our teenagers of 1996 are very savvy. They are wise, they are street-smart, and they know and they can see right through an adult who comes in with a double message. And they will say—if I took that message, Senator, they would say: Mr. Devlin, you are nothing more than a hypocrite.

In fact, you know what I do ask them? I say, two illustrations I will use. I will say to them: What if I came in here as a 43-year-old man and I said that I was sexually pure with my wife 364 days out of the year, but yet I was not sexually pure 1 day out of the year? How would you respond to that? They react viscerally and they say: Well, you would have no right to be here; you would be a hypocrite; you would be a chump, a liar, a thief. And I say: Well, why? Well, because you are cheating on your wife.

And then the other illustration I use is, I say to them: Let us turn roles around here. You are 43 years old and have a 15-year-old daughter who is attending Girls High School in Philadelphia, where my oldest daughter attends, and you know that the guys down the street on the football team at Central High School are engaging your daughter in sexual activity and relations. I say to these young men: How would you respond to that man?

And these guys jump up right from where they are. It does not matter what school they are from, white, black, Asian, Latino, socioeconomic level. They react viscerally and they say that they would not stand for that, that they would go to those young men on that football team or whatever team and say: We do not agree with, I do not agree with what you are doing to my daughter.

So you see, a cultural message needs to be one message. I disagree with Dr. Foster. In the urban areas among all different communities, I believe that a mixed message is a very fatalistic message, and if we are going to provide a future for our young people we need to tell them that abstinence is the only way, abstinence and sexual purity. So at least in the urban area, I have had a very different experience, and we need to promote one message and one message alone.

Senator SPECTER. I see you seeking recognition, Dr. Foster.

Dr. FOSTER. I do. I believe there may be one other physician on the panel. I do not know if I am the only physician here.

Senator SPECTER. Dr. Hager is a physician.

Dr. FOSTER. Yes; I thought there was another physician.

Senator SPECTER. Dr. Carlson is a Ph.D., correct, Dr. Carlson?

Dr. CARLSON. Yes.

Dr. FOSTER. This is not a simple issue. It is very, very difficult. I find myself in an ambivalent position. I have lived and worked in this particular community I just mentioned since 1987. It is a different community. Eighty-seven percent of the families are single female-headed households.

I feel a moral and a medical responsibility when an 18- or 19-year-old rejects my message, to try to protect their lives from HIV-AIDS and sexually transmitted diseases. I do not know what the others on the panel do. I do not know what their response is to those who do not heed the primary message. I cannot call it a singular message. It is a primary message. But I feel a responsibility.

But I think when we come to problem solving, we need to take a deeper look at other areas. Other Western nations do not have near the problem we have. They have far fewer pregnancies, far fewer births, far fewer abortions. What is the difference about them than us? Many of these nations are heterogeneous—France, the United Kingdom.

One of the things that distinguishes them, they have K through 12 education in their schools and there are no efforts to harangue and browbeat teachers and prevent them from educating.

There is another big difference. We talk about parents in this country. I do not know if the others on this committee are aware of this, but 72 percent of males and 66 percent of females get their first information about sex and sexuality, not from their parents, but from people in the streets, peers who know virtually no more about this issue than they do.

We have to educate parents in this country. I have got 28- and 29-year-old grandmothers in Nashville. They cannot have an in-depth knowledge about these various issues.

In concluding my statement, I am very hopeful that the new campaign on teen pregnancy will help bring about some of these answers. This is a nonpartisan body which has been formed. It now has a board of 18 members. It has a chair. Former New Jersey Governor Tom Kean, a Republican, chairs this board. Four task forces have been set up. Each has a director now. The four task forces are: religion and the clergy, the media, State and local government, and long-term research efforts.

I am most hopeful that through this nonpartisan committee alternative of the ideas—abstinence is primary and fundamental, but as a physician and realistically I have to have some responsibility for those who, for whatever reasons, fail to heed this message.

Senator SPECTER. Go ahead, Ms. Sullivan, and we will give Dr. Hager the last word.

Ms. SULLIVAN. I happen to have been invited to one of the meetings 4 or 5 days before the national committee was announced, and that is one of the reasons that I feel so strongly. I made the plea in that 5-hour meeting, I made the plea five or six times to please address the overall problem, not just teen pregnancy. And my impression of that whole distinguished, very extensive committee is—

Dr. FOSTER. I was there.

Ms. SULLIVAN. No; you were in New York. I was at a meeting in Washington.

The whole group are really only concerned about pregnancy. They did not and do not seem to be addressing the real problem of teens being sexually active, and that was one of the greatest disappointments to me.

And also I have got the briefing book from there that was presented at the New York meeting, and that briefing book contains very definite references and letters in there that they are only concerned with pregnancy. And I think that is a real disservice to our young people, and that is what has got me very concerned about back-to-public funding and public programs, because I do not think that commission is at addressing the real problem.

Dr. FOSTER. Senator.

Senator SPECTER. Doctor, you want to say a word?

Dr. FOSTER. Just a word. I do not think that is a correct characterization of the meeting. That is not how I read it whatsoever, so I think we have different interpretations.

Senator SPECTER. Well, I think that you have made a very compelling point, Ms. Sullivan, about the broader aspects, as you put

it, of self-esteem and emotions, in men as well as young women. There are a broader array of factors which at least need to be more emphasized in the overall scheme or the overall approach.

Dr. Hager, you made a comment that emphasis in sex education was misdirected and I had intended to ask you about that earlier. But let me give you that as a starting point for your overall evaluation as to the discussion we have had about the dual message, so to speak, or the 4 to 5 percent at a minimum who will not be prohibitable or the hormones. Or how would you sum it up?

Dr. HAGER. Thank you, Senator.

This is a very complex issue. I do have some disagreements with Dr. Foster, although we both practice medicine and we both are interested in helping young people to achieve their full potential in life.

One of the things, if I could just make a few comments about condoms, and that is that numerous studies—the McCabe and Howard study from Emory University surveying that after they had taught refusal skills and sex education in the Atlanta school system to eighth graders: Over 70 percent of the black females and over 50 percent of the black males after that study said: Please teach us how to say no, continue to teach us; do not let this program stop.

There is a cry among young people, the very young people Dr. Foster is talking about, to help them to know how to say no. That is what we are talking about here today, is teaching them those skills, and not backing off of that.

We have had a national emphasis in this country, Senator, for the last 4 years on condom usage. Today in the latest studies, the figures that were published in 1996, only 52 percent of all sexually active young people are using condoms. So 50 percent are not using condoms even knowing the risks.

The DeVincenzi study out of Italy that the CDC widely quotes, in that study they say that 122 couples, knowing that their partner was HIV positive and they were not, 122 couples consistently used condoms and none of them became positive, and 123 who did not consistently use condoms, 17 percent became HIV positive. But only 22 percent of all the couples enrolled in that study were able to consistently use condoms knowing their partner was HIV positive.

The point I am making, Senator, is that no matter how much we have emphasized the benefit of condoms, 15 to 30 percent failure rate in pregnancy, 30 percent failure rate according to the Weller study for HIV positivity in transmission, young people have not bought the message. They want another message.

That message is abstinence. That message is to teach them how to say no. That message is to enable their parents or, if their parents are not there, their role models or the school system to teach them emphatically how to say no and to abstain, knowing that abstaining is the only way to avoid the physical consequences, STD's and pregnancy, and the only way to avoid the emotional consequences.

Senator SPECTER. Well, I thank you very much for this very enlightening discussion. We are going to be seeking to increase the allocation for abstinence education this year. The budget is obvi-

ously very tight, but my own view is that this is a very high priority item on many lines—the message to young people who do not get it otherwise, the foundation for a lifetime of their own personal conduct, and very, very material economic impact. We intend to do more to develop the dialog.

SUBCOMMITTEE RECESS

We thank you very much for coming. The subcommittee is recessed.

[Whereupon, at 10:52 a.m., Thursday, July 11, the subcommittee was recessed, to reconvene subject to the call of the Chair.]

ABSTINENCE EDUCATION

MONDAY, JULY 22, 1996

U.S. SENATE,
SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Pittsburgh, PA.

The subcommittee met at 9:15 a.m., in the Allegheny Courthouse, Grant Street, Pittsburgh, PA, Hon. Arlen Specter (chairman) presiding.

Present: Senator Specter.

NONDEPARTMENTAL WITNESSES

STATEMENT OF REV. KRIS D. STUBNA, SECRETARY FOR EDUCATION IN THE DIOCESE OF PITTSBURGH

OPENING STATEMENT OF SENATOR SPECTER

Senator SPECTER. Good morning, ladies and gentlemen. We will begin our hearing of the Appropriations Subcommittee on Labor, Health and Human Services, and Education which we have convened specially in Pittsburgh today on the subject of abstinence. While most of the national dialog focuses on matters relating to the economy and budget or on crime control or on foreign affairs, there is a vast field of morality which is equally as vital for our progress as a civilized society as is the economy. And the subjects of education and health and human services are very important matters on the spectrum in the Congress today and the problems facing our Nation today.

We find that on the subject of teenage pregnancies that surprisingly the United States tops the list of birth rates among teenagers of all the developed countries in the world, representing a rate of some 60 births for every 1,000 15- to 19-year-old young women, and approximately 72 percent of these births are out of wedlock.

As well as the tremendous emotional and moral impact on our country, there's a concomitant financial impact with the taxpayers spending a total of some \$6.9 billion in welfare, food stamps, medical care, prison costs, and another \$8.9 billion lost to the economy from the adolescent childbearing factual matters.

At the present time there is pending in the U.S. Senate a welfare reform bill, which we debated for most of last week and will proceed on again today with final passage expected tomorrow, in trying to move people from the welfare rolls to the tax rolls.

President Clinton has said that we need to reform welfare as we know it. There is a consensus on both sides of the political aisle that welfare reform is necessary, and a key part of the problem involved in the welfare issue comes from unintended pregnancies among teenagers.

The issue of abortion is one of the most divisive issues, perhaps the most divisive issue facing America today, the most divisive issue in our country since slavery. And while there are considerations as to what ought to be done on that subject, there are some points that we can all agree on, and that is the desirability of preventing unintended teenage pregnancies, which is a cause or a contributing factor to so many abortions in our society today.

Whether you are prochoice or prolife as those terms are used, the issue of abstinence is one where I think we can all agree as a society. I personally am very much opposed to abortion. I do not think that the Government can control it in terms of mandates or absolutes, but I think the Government can contribute a great deal to changing the social and moral fabric of our country on trying to promote abstinence which would discourage unintended pregnancies and discourage many who now use abortion.

At the other end of the spectrum there's the issue of adoption, which would encourage young women or women generally to carry to term. I have introduced legislation on both the subjects of abstinence and adoption, cosponsored by my distinguished colleague from Pennsylvania, Senator Santorum, with 12 other cosponsors on both of those bills to try to increase the funding. And right now we are in the final stages of determining what our budget will be for the Departments of Labor, Health and Human Services, and Education, and a key purpose of this hearing is to see what your funding priorities are here. We are having hearings in many places—we had one in Washington recently, and we're going to have some more in Pennsylvania during the course of the next several weeks.

We have a very distinguished panel of witnesses. I'd like to call our first panel at the present time, Rev. Kris D. Stubna, Secretary of Education for the Diocese of Pittsburgh; Ms. Amy Scheuring, Director of Human Sexuality Alliance, and others on the first panel who may not yet have arrived, Ms. Cathy Hickling, editor of the Expression Christian Newspaper; Ms. Jacqueline Henderson, abstinence editor, member of the "Relating, Dating, and Waiting" Youth Abstinence Ministry; and Dr. Bradley J. Bradford, chairman of the Department of Pediatrics at Mercy Hospital of Pittsburgh. We thank you all for coming.

Our leadoff witness today is Rev. Kris D. Stubna, who has a very outstanding background, having gone to high school in this area at Montour McKees Rocks, National Honor Society there and the Westinghouse Science Award, a graduate of Duquesne University in 1981, president's award for excellence in the humanities, is the secretary for education of the diocese of Pittsburgh where there's a very extensive educational program and process on abstinence.

Reverend Stubna, we welcome you here today and look forward to your testimony.

SUMMARY STATEMENT OF REV. KRIS D. STUBNA

Father STUBNA. Thank you, Senator Specter, it's a pleasure to be here this morning. In my capacity as the secretary for education, I oversee a Catholic school system in our diocese of over 37,000 students in kindergarten through 12th grade.

Senator SPECTER. Reverend Stubna, if I might interrupt you for just a minute, our standard practice is to ask for 5 minute opening statements, full statements will be made a part of the record, and that gives us a maximum amount of opportunity for questions and answers.

Father STUBNA. Thank you. In addition to over 40,000 students in Catholic school, we have another 50,000 in parish-based religious education programs. So I just wanted to let you know that we're dealing with quite a number of students in our system.

In October 1994 there was an article in the Atlantic Monthly by a woman named Barbara Dafoe Whitehead, who talked about the massive and systematic failure of the comprehensive sex education programs that had secured a place in many of the public school curricula across the country.

Common to the philosophy and pedagogy of these sex education programs is the inherent assumption that once teenagers acquire a formal body of sex information and skills, including the proper contraceptive technology, then they will be able to govern their sexual behavior responsibly. The foundational premise is that more knowledge about sex translates into more responsible sexual behavior.

There was a researcher, Douglas Kirby, out of California, the ETR Associates, who's been studying sex education programs for many, many years in our country. His extensive research shows that students who take sex education classes in schools do know more about these matters than students who don't take those courses, but his statistics have proven in dramatic fashion that more knowledge about sex does not have any measurable impact on sexual behavior.

As currently taught, sex education has little impact, he went on to say, on teenagers' decisions to engage in or to postpone sexual activity, nor according to Kirby, do knowledge and technique-based sex education programs which teach responsible or so-called safe sex significantly reduce teenage pregnancy.

In fact, except for a very brief pause in the early 1980's, pregnancy rates for 15- to 19-year-olds have risen over the last 25 years to the present high of 111 pregnancies for every 1,000 girls. In fact, I think all of the statistics that we see point to the reality that we're living through a new sexual revolution in America.

The children of the baby boom generation are beginning to have sex at earlier ages than their parents did. According to a 1988 national survey of young men, one-third of teenage males have sex by the age of 15 and 86 percent by the age of 19.

Recent studies have all revealed that our children today are initiating sexual activity at a much earlier age, that they are far more sexually active and that they have far more partners.

While only 4.6 percent of 15-year-old girls had sexual intercourse in 1970, the figure rose to 25.6 percent in 1988, and by the age of

19, that percentage has climbed to 76 percent. And despite all of the high levels of information being made available, contraceptive technology, as well as distribution of condoms through the school-based health clinics, teenage pregnancies continue to escalate.

One million teenage girls each year find themselves pregnant, about 37 percent of those end in abortion and about 15 percent in miscarriage. Almost one-half of these pregnancies result in child-birth leading to teenage motherhood and all of the devastating social, economic, and psychological consequences that you've already alluded to and all of this despite a very high level of Federal spending of about \$1 billion per year on family planning, \$300 million of which is devoted to adolescent contraception.

Abstinence is the only strategy for preventing teenage pregnancy and sexually transmitted diseases that is 100 percent effective. According to the Centers for Disease Control and Prevention, abstinence education is the most effective solution to unwanted pregnancy and sexual disease.

Researchers in the field have responded overwhelmingly that sex education works best when it combines clear messages about sexual behavior with strong moral and logistical support for the behavior sought.

A project conducted recently by the Search Institute of Minnesota discovered that knowledge alone has very little effect on sexual decisionmaking, but the teen's own values and strength of conviction about what is right far outweigh peer pressure or fear of consequences when it can be enhanced.

Willingness to abstain then is the heart of the matter. It's unlikely in my mind that the desire to wait can be taught in the didactic sense, but if the culture at large, the neighborhood culture or even the subculture of our schools supports the virtue of abstinence, well-designed programs can help a teen to practice it.

Abstinence programs over the years have developed effective methods with which teens are empowered to implement their own convictions, these include strong resistance skills, fostering strong feelings of control over their own lives, establishing higher educational expectations, and developing a strong sense of values.

American culture must provide the concepts of virtue which adolescents can strive to achieve. I'm reminded of an editorial in Time by Lance Morrow in 1995, what might work, he said, would be an entire context of abstinence, a culture of abstinence, what philosophy would call enlightened abstinence rightly understood.

In my testimony written down there are many abstinence programs around the country that have already produced very promising results. In California in a high school in San Marcos a program called Sexuality, Commitment and the Family, the year before the curriculum was implemented 147 girls were reported pregnant, 2 years after the program was implemented only 20 girls became pregnant.

Historically the eighth grade class in a middle school in Chicago included a number of already pregnant girls. When the school decided to adopt an abstinence program for kids called Project Taking Charge, there were many skeptical parents and board members, but after 3 years of that program, the school graduated three pregnancy free classes in a row.

In Washington, DC, there's a chapter of Best Friends, only 1 out of 400 girls has become pregnant since the program began. Statistics show that between 20 and 70 pregnancies are common for the same sized group of fifth to ninth graders and the list could go on.

I offer all of this just as evidence to counter those like our former Surgeon General, who while not disagreeing that abstinence is the most appropriate course for adolescents, simply believes that abstinence is impossible for an adolescent to practice.

Teenagers will not abstain from sex, they say, anymore than the frisky neighborhood dogs, and its rather Neanderthal thinking to expect them to. The best that responsible, caring adults can do in this view is to distribute condoms and hope that they will have enough sense to slip one on in time.

To me, that's the great failure of our generation. Rather than take the time and effort and hard work necessary to teach our children the discipline of a virtuous life, and they should be worth that at the very least, we take the easy way out by trying to mitigate the consequences.

Unfortunately, as we all know, the young tend to fulfill the expectations given them. Government-sponsored condom distribution, comprehensive sex education programs communicates a very mixed message by making abstinence only one option among others, such as contraception and abortion. In sending this message the Government announces clearly to our children that society expects them to be sexually active, and it's impossible to be abstinent.

Our young people today want help in saying no to sexual activity. When Emory University surveyed 1,000 sexually active girls and asked them what they would most like to learn to reduce teenage pregnancy, 84 percent responded how to say no without hurting the other person's feelings.

A recent study conducted by the Sex Information and Educational Council of the United States [SIECUS] found that of the teens who have had sex 54 percent wished they had waited until they were older, and another 60 percent asked for the help that they needed to say no, again, a confirmation of what teenagers are needing today.

As a Catholic educator I can speak of the value of an abstinence-only curriculum, this is what we do every day in our Catholic schools, teach our young people the value of abstinence and chastity and saving sexual activity until marriage.

In our own diocese in Pittsburgh we have created and implemented our own chastity education program called the Catholic Vision of Love, a curriculum for grades five through eight. We have used programs like Teen STAR and True Love Waits with our high school students. The Teen STAR program, for example, has demonstrated that the teens who began the program as virgins remain so, and only 10 percent of males and females experimented sexually after beginning the program, while more than one-half of those who had already initiated sexual activity prior to the program stopped that activity as the program unfolded.

The results from these abstinence-only programs have been wholly consistent. A 1990 study by the University of Michigan entitled "The Heart of the Matter" showed that Catholic high school stu-

dents were found to engage in far fewer at-risk behaviors, particularly with regard to sexual activity.

In the article last week by Sol Stein in the Wall Street Journal, I'd just like to quote his overall opinion, as liberal child advocacy groups tout an endless array of prevention programs that are supposed to stave off teen pregnancy, they consistently ignore Catholic schools which nearly always succeed in preventing these pathologies.

I end by just saying as those entrusted with the trust of forming our children for hope-filled, successful futures we can't retreat from our responsibilities, which is what Barbara Dafoe Whitehead ended her article in claiming that the sex education programs are really a retreat, not reality. We simply can't retreat from our responsibilities.

As soaring rates of teen pregnancy and illegitimacy work to threaten our country's social fabric and moral foundation, we have to work to combat adolescent pregnancy. Abstinence-only education does work, it's proven effective. It is the most highly effective and sensible solution to the problem, and I would like to end by offering my strong support for increased funding for abstinence-only educational programs through the Adolescent Family Life and Abstinence Education Act of 1996. Thank you.

Senator SPECTER. Thank you very much. I note that your résumé, what purports to be your résumé, lists you as Reverend and other documents as Father, which is appropriate?

Father STUBNA. Father is fine, more informal.

Senator SPECTER. Thank you very much, Father Stubna.

STATEMENT OF CATHY HICKLING

Senator SPECTER. We turn now to the second witness on our prepared list who is Cathy Hickling, who along with her husband, Thom, founded Expression, Pittsburgh Christian Newspaper in 1981. They are creative consultants to Cornerstone's television daily program known as His Place. The show is set in a diner where the staff and customers have focused conversation on events of the baby boom generation with a view toward morality emphasis. I had an opportunity to be on the program myself, and it's quite a program.

We welcome you here, Ms. Hickling, and look forward to your testimony.

Ms. HICKLING. Thank you very much, it's really great to be here. Turning my mike on, it is still great to be here, thank you.

Ten years ago, 2 months after the birth of my third child, I went undercover to a 10th grade health class where a new sex education curriculum was about to begin. I came away from the experience with images that had nothing to do with evaluating that curriculum, these were awkward, excited, vulnerable young minds wanting to fit in and be accepted.

How can 1 million teen pregnancies annually be averted, if not by stressing birth control methods at younger and younger ages? I don't know. Despite \$3 billion spent in Federal funds to combat teen pregnancies since 1970 and the public service ads emphasizing the use of condoms, the problem seems to grow year by year. At

Expression and at His Place, Thom and I have chosen to offer information about abstinence education to teens.

There are many resources available for those who want to help teens choose abstinence from sexual intercourse as the best choice during the developmental years, and I list some of these resources in my extended testimony.

My own convictions to emphasize chastity is much greater now that my four children range from age 8 to 14. I read the same alarming statistic that Father Stubna mentioned from a study by Planned Parenthood. Of the 1,000 sexually active girls 16 or younger who, when asked what topic they wanted information on, this just astounds me, 84 percent said they wanted to learn how to say no without hurting the other person's feelings.

Why do kids have sex? I asked my own 14-year-old daughter about this, and she confirmed that she felt learning to say no to a persistent boyfriend was much harder than the facts that she had learned in her public school health class. She said they teach you how to say no to drugs and to scream and run away if you're attacked by a stranger, but no one tells you how to say no to someone that you care about.

I am a believer in abstinence education, however, in my opinion, there's an aspect to both the failed public sex education campaigns and abstinence advocates that's missing.

Statistics show that 1 in 4 or 5 females and 1 in 7 or 8 males will be sexually assaulted before age 18. A vast majority of this abuse is perpetrated by someone the youngster knows. Churches that emphasize remaining pure are ignoring up to one-quarter of the girls who have been victimized. Impersonal health classes may trivialize the child's pain and shame.

We have to become sensitive to sexual abuse. What does abuse have to do with teen pregnancy? Well, plenty. The AMA issued a set of guidelines this month to help physicians deal with the physical, emotional, and social consequences of abuse. And if an impersonal doctor treating a sexual injury physically should address emotional and social pain of abuse, shouldn't those of us discussing public policy look at this problem as it relates to teen pregnancy?

I'm not talking about pregnancies that result from rape, I'm talking about teens who have sex because that's what they think love is as a result of continued abuse. The AMA says that 700,000 women are sexually assaulted each year, 61 percent of these are under 18. Seventy-five percent of the assaults are committed by family members or acquaintances.

In a recent University of Washington study of 535 teens who became pregnant, the girls we're talking about right now, 66 percent had been sexually abused prior to becoming pregnant. While sexual practices among teens may vary according to age groups, regions, and socioeconomic groups, abuse crosses all cultural boundaries, I know because it happened to me.

From the earliest age of my remembrance to at least 10 or 11, I was molested by a now deceased neighbor in my early sixties white neighborhood. I was molested and raped by a disabled uncle to whom I was expected to extend kindness and sympathy. I never told anyone which is not unusual, and I was told over and over

again at home and at church that I should save myself for marriage and that nice girls don't.

These dual signals from adults who said they loved me and an ignorance of honest information caused unbearable trauma in my life. I don't want to see my children or anyone else's child further victimized by insensitive public school officials or by Sunday school teachers. I'm infuriated by some of the abstinence materials I've read that ask, what if you've already given away your virginity.

Kids who have lost their virginity do not need the added guilt that they're bad, sinful, and wrong. Some may have made misinformed choices, others may have been raped and molested by adults they trust. Teens need to know just what a lot of the really good abstinence materials, some of the stuff that Father Stubna mentioned, that they're marvelously created. They need to hear that no one has the right to touch them without their permission. Kids need to be taught that it's OK to say no and have the skills to carry that out. Silence about sick family and community secrets has to be broken.

It is a viable choice to choose abstinence once a person has experienced abuse. I tried it, not so much out of personal conviction as much of a sense of feeling very filthy, used and worthless. Who would want me now, I'm 9 years old, and I'm not a virgin. The easier road is to continue in sexual activity.

When a person has learned that they can receive love and attention through sex, it's a really hard pattern to break, but here is where the excellent esteem building abstinence literature and training could go a long way in both the healing process for some and act as a preventive tool for others.

Why do teens have sex? Granted, for some it's raging hormones, but for others it's a desire for closeness, intimacy, communication, security, a longing to feel loved and needed. Want to feel appreciated and worthwhile, society blares out the message through TV, advertising films and music we should have sex. But teens can be taught to say no to unwanted touch. They can identify what they're needing when they feel like acting out sexually.

We parents and educators must discover their needs and meet them just like ours can be met. Love expressed through care and safe touch can be so satisfying. Cuddling, listening, emotional honesty, and closeness with parents and friends may not be erotic, but may very well satisfy the need for love that our teens so profoundly are expressing through all of these pregnancies.

Jo Ann Gasper, executive director of the National Association for Abstinence Education and a former Public Health Service deputy, articulated how I'd like to see my children's world in the future. She said abstinence education is the next generation. She emphasized the need for values-based, family-centered, age-appropriate information and said this must be backed up with information and training skills that include refusal and avoidance practice for teens. Most of all, she emphasized the need for we parents to learn the facts and pass our knowledge and family values on to our children with warm, close communication.

We need to learn to listen to our kids. This is how I believe public policy should be geared, embrace the ideals of abstinence as a

viable public health policy and put the education and communication burden back into the hands of parents.

Thinking back on my health class experiences both 10 and 25 years ago, I wish someone would have told me that I was OK just the way I am and that having sex and being loved are two very different things. It may be too late to help me, but it is not too late to help my children and all of our children. Thank you.

Senator SPECTER. Thank you very much, Ms. Hickling, for that testimony and sharing with us your own very trying personal experiences.

STATEMENT OF AMY SCHEURING, DIRECTOR, HUMAN SEXUALITY ALLIANCE

Senator SPECTER. We now turn to Ms. Amy Scheuring, who has a master's degree in education from the University of Pittsburgh and was a founding director of the North Pittsburgh Pregnancy Care Center. In 1990, Ms. Scheuring left the center to be a full-time mom while building up an outreach called, A Is for Abstinence. She is a wife, home schooling mother of two, and currently director of the Human Sexuality Alliance here in Pittsburgh. Welcome, Ms. Scheuring, and we look forward to your testimony.

Ms. SCHEURING. Thank you. I appreciate being here. Also I appreciated you using the word morality when you're talking about people that are making the decisions. It's great to hear that word, morality.

For the past 20-some years it seems that our public schools have been promoting two messages, and I think they've been promoting them pretty loud and clear, one is that sexual abstinence is the best choice. The other message, though, that students are hearing is that a child who chooses to have sex can still be safe and responsible.

During the 5 years that I worked in that pregnancy center, in the testing center, I met face to face with the living, breathing results of that mixed message. Pregnancy, abortion, heartbreak, disease, guilt, confusion, those are all the harvest of what I believe is a tragic experiment of mixing that message.

As we have continued to lower the standards in the public schools for our students, they have continued to live up or down to them. So 10 years ago I decided that in my little small sphere of influence I would start raising the barn, so I began to visit the schools and youth gatherings in the North Hills in Pittsburgh here where I live to talk with kids about sex and relationships. And my bottom line was always the same, abstinence is the best thing you can do. Abstinence is the only way that works.

And, you know, I was so surprised to find that kids responded to me very positively, they were so hungry to hear that message that abstinence really works. As the logic unfolded before them, they changed their minds and many of them changed their lives as well.

But even after those successes in the schools, I still have times where I'm very frustrated. The reason is that many times I am followed by the local clinic representative who then tells the children the 13 most popular methods of birth control. They use plastic models, a lot of visuals, and so the school has taken no moral

stand. They have been responsible to bringing the best possible information to the students and the buses come and go and the kids go home, no one has provided ongoing support for wise choices. Wounds are lanced and left bleeding, hearts are stirred up, they're left confused by the mixed message that we call comprehensive sex education.

I believe schools want to do better, and I know that they can do better. They are met with several obstacles, one is the curriculum availability. Many great curriculums that we've heard talked about have never reached a health teacher's desk because the funding was limited at the time that those programs were ready to be marketed.

The second obstacle is that popular idea that abstinence really won't work, that it's not realistic, these are the nineties, Amy, come on. But what we find is that it is a minority of students who are having sex up until the 9th, 10th, and even 11th grade in most schools, but the schools have been teaching the whole class as if everyone is having sex.

In most classrooms there may be 80 to 90 percent who sincerely want to get it right, but instead of character building strategies to make wise decisions, they receive a second-best approach that treats the symptoms rather than the root issue.

If we do not move forward decisively to promote a higher standard of sexual morality among our children, we will certainly see the continued erosion that we've talked about here. The success of the abstinence programs is well documented, abstinence works because abstinence is best. It is the medical best that we can give our kids, it's the physical best that we can give our kids. It is the emotional and relational best. Young people dive into physical intimacy before cultivating the qualities and character traits that build healthy relationships.

When built on a physical foundation, the couple may never achieve trust, honesty, good communication, acceptance or respect. Abstinence is the moral best, and again, we must raise a higher standard. Living up to that standard will build character in these kids.

I'm going to close with a story. A month ago I visited an 18-year-old, a single mom who had just delivered twins. By the way, these babies were just gorgeous babies, twins. And I began to talk to her about her future and the future of her children and what she expected in her future. And I asked her a question, I asked her, why not marriage with the boy she was living with? Why not get married to this guy? Her answer, I believe, is the cry of this generation. She said to me, marriage is obsolete. She said, marriage is for the old people at Denny's. She said to me that your generation, she was talking to me, grew up with Cinderella, the dream of meeting Prince Charming, getting married in a white dress and living happily ever after. She said, my generation doesn't have that dream, and by the time my babies grow up, the old people at Denny's will all be dead.

We must raise the standard, and we must do it quickly. If we do, our children will always benefit. Sound directed abstinence education that promotes the high standard of sex within marriage will protect our young people from the physical, emotional, and rela-

tional consequences of premarital sexual activity. It will provide them with a hope for a lasting marriage, equip them to make wise choices about the dating and relationships they're in now, and it will affirm their value as people who deserve the very best that we can give them. Thank you.

Senator SPECTER. Thank you very much, Ms. Scheuring. That comment on marriage is obsolete we'll come back to in the question and answer session.

STATEMENT OF JACQUETTA HENDERSON, ASSISTANT DIRECTOR OF THE FAMILY CENTER DAY CARE, NORTH BRADDOCK, PA

Senator SPECTER. I'd like now to turn to Ms. Jacquetta Henderson, who is assistant director of the Family Center Day Care of North Braddock, involved in numerous youth ministries throughout the area. She is a crisis pregnancy hotline counselor with the Association of Christian Churches in Pittsburgh and a member of Relating, Dating, and Waiting Youth Abstinent Ministry where she speaks in churches, youth shelters, and schools in Pittsburgh.

Welcome, Ms. Henderson, and we look forward to your testimony.

Ms. HENDERSON. Good morning.

Senator SPECTER. Good morning.

Ms. HENDERSON. Senator Specter and distinguished panel and also the interested press and visitors, please allow me a few minutes to share my own personal testimony.

As a single parent of a 15-year-old son, I am personally aware of the despair a crisis pregnancy brings to the life of a teenager. And as the eldest of five children of a family who resided in suburban Chicago, my parents and myself expected me to succeed. In fact, I did academically. I was the valedictorian of my class, and now I am on the dean's List at the Community College of Allegheny County.

I participated in several of my high school's extracurricular activities, and after having attended a private all-girls Catholic high school, I knew that abortion took innocent lives after viewing the silent screen my junior year. I knew about sexual education, you see, we had marriage class and we also had a sex class thereafter in that order.

Also being the daughter of a Baptist minister, I knew that fornication or sex outside of marriage was wrong, yet I still became pregnant that junior year. You see, I received contrary messages from society, music, television, my friends and even a close relative. Those messages, you can have sex, in fact, you need sex to survive and fulfill a need, it's the one thing that cannot be controlled. It's OK for you when you love someone. Someone went as far as offering to take me to the doctor to get birth control pills if the need should arise.

Well, I didn't feel at that time the need, so I passed on that offer. I did not purposely set out looking for sex, it just happened. They failed to tell me how to say no. They told me it was wrong to engage in sexual practices, but like I said, it just happened.

Funny, you know, the Bible tells us in Ecclesiastes there is nothing new underneath the sun. Even today the youths that I encounter say the same thing, I didn't plan for it to happen, it just did.

And one August night in 1980 my life tragically changed. Nine months later I gave birth to a baby boy. Some statistics show a high infant mortality rate for teenage mothers, most likely these teenage mothers in this predicament would drop out of school, not only that, it would decrease any, if not all, of my educational opportunities, and not to mention my occupational ones.

Without a good education a dependency on welfare was inevitable. Teen pregnancy presented such a gloomy and challenging picture for my future. Oh, and just because I'm African-American, some even predicted my tendency to repeat this mistake over and over and over again.

Well, praise the Lord, God Almighty, I give thanks and credit to the one who empowers me daily to live a life of abstinence. Can God help these teenagers? Yes. Can practicing abstinence without God help these teenagers? Absolutely. You see, it may be a godly principle, but these principles work for everyone.

You see, I discovered, after two children, two abortions and also being afflicted with herpes, I finally discovered that sexual intercourse, protected or unprotected, brought devastating consequences I did not want to experience ever again. So that left me with only abstinence.

Now I actively pursue getting the message to teens that abstinence is the best choice. Unprotected sex increases your risk of contracting sexually transmitted diseases, unplanned pregnancies, and emotional scars. Protected sex decreases the risk, but the consequences still remain lurking in the shadows like a menacing stranger. Abstinence is the only solution without any risks.

Let me address those messages I quoted earlier. Sexual intercourse is not a need to survive. I have engaged in this practice for years, and I'm still alive, healthy, and strong without the threat of those menacing consequences lurking at my door. Sexual intercourse can be controlled. It's like any physical appetite, once the hunger is fed, it grows. If you suppress it, it will not grow.

I have a plan for my life I pursue with my whole heart, my body, and soul. I will not allow this appetite to distract me from the course I have set before me like an athlete training for the Olympics. My mind is set on impacting people, my community, and the world. And last, I do not need to demonstrate my love sexually. I discovered love is without a price, true love without conditions.

I would also like to address some of those gloomy statistics. My son is now 15 years old. He has lived well beyond what people have predicted. I am not a high school dropout, in fact, I graduated on time. I am currently enrolled, as I said before, at CCAC College and have been for the last 2 to 3 years. And as you stated, I am the assistant director of the Family Center Day Care and have been for the last 8 years.

I am not on welfare, though I have been. I used the system as an assistance, it assisted me until I was able to maintain my family financially. Unlike some who believe it's an impossibility for African-Americans, well, I have successfully maintained a celibate life for over 8 years, and I do know of other African-Americans who have chosen this way of life, too.

Along with the team that we've started, I encourage teenagers to think and make wise choices for their lives. It begins now. We

present a case for abstinence similar to the one in court. What teenagers want are good relationships. What happens when sex enters into that relationship? If having sex debilitates that relationship, is it worth it, of course not. We provide no answers for them, just the facts.

I have discovered after extensive speaking engagements our youth want to say no. The popular question we are asked is how far is too far, tell me. Teens want to get so close, they want an intimate relationship with another individual without consequences. They realize that these consequences are too high of a price they want to pay.

There are places where teenagers can go to receive help, for instance, the Association of Christian Churches. This is an organization that provides shelter, adoption services, practical needs such as baby food, furniture and clothes, and day care referrals, et cetera. There's the Harbor of Light, a future site in Turtle Creek will be a safe haven of rest for those mothers seeking shelter, and I'm also part of the Youth Investment Plan in Braddock, PA, which provides excellent counseling services for teenagers who need any. All of these are avenues a teenager can travel if they need be.

To end, yes, my life was drastically changed since I pursued abstinence, and so have many others I know. Abstinence goes beyond race, culture, and nationality. We can help youths discover that self-control and discipline help pave the road to success. Uncontrol and undiscipline only destroys any, if not all, opportunities for success. In fact, an undisciplined child only grows up to be an older undisciplined child, which do we desire for our society?

Senator SPECTER. Thank you very much, Ms. Henderson, for again sharing your own personal experiences.

STATEMENT OF BRADLEY BRADFORD, M.D., DIRECTOR AND CHIEF OF GENERAL PEDIATRICS, MERCY HOSPITAL, PITTSBURGH, PA

Senator SPECTER. We now turn to Doctor Bradley Bradford, chairman of the Department of Pediatric Residency Program, director and chief of general pediatrics at Mercy Hospital of Pittsburgh, also the college health physician for Duquesne and medical consultant to the health programs at West Allegheny School District, project director of Adolescent Family Life Program granted through Mercy Hospital of Pittsburgh, which received almost \$500,000 from the Department of Health and Human Services as part of the ongoing Federal funding project to test for abstinence.

Doctor Bradford, we welcome you here and look forward to your testimony.

Dr. BRADFORD. Good morning. The formulation of public policy involves the identification occasionally of real public problems; the evaluation of their popular understanding and acceptability, and rarely a reasoned consideration of the credibility and validity of any particular solution from a scientific viewpoint.

As a pediatrician, I require no education as to the long known issues and consequences brought about by adolescent pregnancy and related adolescent sexual activity; I require as a pediatrician no public popularity analysis for solutions for debate—meningitis requires penicillin regardless of popular sentiment and finally, cer-

tain truths are self-evident and need no scientific study or emotional overlay as to the likelihood of their success.

For two decades following my pediatric training, I have cared for the infants born to teenage mothers. I have treated teenagers with sexually transmitted diseases and have most recently seen the consequences of AIDS in the pediatric arena. I have spent countless hours in adolescent projects, communities centers, hospitals ICV's, and what I have learned from all of that is that irresponsible behavior has consequences; that prevention ideally through abstinence is ideal, but not always possible. And that finally while the ideal is not always possible, sometimes teaching young children to see consequences, to feel good about themselves, to say no, although this is politically improper to say, makes sense. Nothing works, however, for everybody the same.

This hearing is designed to focus on abstinence and the promotion of this to reduce teen pregnancy, sexually transmitted diseases, and related social and economic costs to our society. Abstinence, however, is, in addition, really about family, it's about responsibility, it is about adults sometimes leading the way, it's about modeling, it's about vision. Barriers to abstinence and responsibility, however, exist at every level of society, political, media, families, and communities. If we say don't smoke but as parents light up, that statement becomes meaningless. If we say behave responsibly but as a community we do not, if we speak toughly but act softly, all of those give confused mixed messages to young people.

As with abstinence—all of the peer counseling and Federal programming to the contrary—adults additionally must stand up and confirm by their own behavior the responsibility that we expect young people to have if it is to work. Abstinence alone is ideal and expedient and popular but must contextually make sense in our culture to teens to have a chance at working.

We live in a society that promotes the conspicuous consumption of everything, including sex. And abstinence does stand out sort of like a lighthouse in the foggy harbor. Remember, however, that such a beacon can guide some people likely in a positive direction. Thank you.

Senator SPECTER. Thank you very much, Doctor Bradford.

Let me start with you, Father Stubna, and your articulations of the programs which you have summarized and produced the results. I'd like you to discuss, if you would, the programs of the archdiocese of Pittsburgh, what they contain in a general way and what their success rate has been.

Father STUBNA. One of the great advantages of the Catholic school system is that our methodology can be totally integrated into curriculum that exists. So part of our success has a great deal to do with at every level of health, biology, in addition to the normal courses that might not be found in a public school curriculum on morality and religion, all of the data about sex education can be integrated.

Senator SPECTER. Father Stubna, you made a comment about how to say no without hurting a person's feelings.

Father STUBNA. Yes.

Senator SPECTER. And that has been a thread going through the discussion here. What's your best recommendation for that? If we had to leave one message today perhaps for the teenagers, what might it be? What would you recommend?

Father STUBNA. It seems that all of our experience in all of the programs that we have going on in our schools and our religious education programs is the need for kids to be taught how to say no, and that comes from a strong sense of self-esteem, teaching them strong resistance skills and helping them to understand that it is possible to live abstinence.

I also want to emphasize that they will never be able to say no if the culture standard is they believe that they can't, and that seems to be the major problem with the mixed messages that are being sent by much of the comprehensive sex education programs.

On the one hand, we're going to tell them you can abstain, on another we're giving them condoms, we're teaching them contraceptive technology and we're telling them that while abstinence is the ideal, it really isn't possible for you to do it. They want to hear that they can do it, that's why the emphasis on the adults, on families, on the teachers of the system who have to support the message that not only are we giving them the skills to say no, it is possible to say no. And many of the abstinence programs have proven that when kids are given that message clearly and without contradiction they are saying no.

Senator SPECTER. Ms. Henderson, that was a theme that you had commented about, the so-called mixed messages. You didn't know how to say no. What would your best advice be to teenagers on how to say no?

Ms. HENDERSON. On how to say no?

Senator SPECTER. How to say no. How to say no to someone whom you love without hurting their feelings.

Ms. HENDERSON. Some of the things that we have already tried in our relating, dating, and waiting group, what we have said is not to place yourself in a circumstance that would invite saying yes, for instance, dating in groups rather than dating alone, for instance, bowling versus a closed, dark room of your home or watching movies at your home or perhaps even in a movie theater.

Senator SPECTER. Do you have to go home alone though, you can't go home in a group?

Ms. HENDERSON. You can go home in a group.

Senator SPECTER. Drop them off one at a time like a bus route?

Ms. HENDERSON. Yes; that's just being honest. It's safer to be in a group than to be secluded by yourself with the opposite sex. If they find themselves in that position, we just tell them you need to say no, you can say no. I mean, that's the best answer that I can give at this moment.

Senator SPECTER. Ms. Hickling, you shared with us a very personal experience where you described what happened to you when you were 9 years old. To the extent that you can tell us a little more about that and how you overcame that tragic experience at a very tender time of your life, I think would be useful.

Ms. HICKLING. Well, I overcame that as a child by overcoming, by doing the best that I could. I put on a big mask of everything is cool with me. I succeeded in everything, I tried to avoid that

issue of what's underneath what's wrong with me, to my parents and to the family around me and to my neighbors. The message was, hey, there's nothing wrong with Cathy, she's doing well, and I kept that up for a long, long time.

Senator SPECTER. Was this individual very close to you in your neighborhood?

Ms. HICKLING. I had a next door neighbor, and there were two different people. And so the messages were really, really cruel. One was I love you, you're beautiful and he paid a lot of attention to me. Nobody suspected in any way.

Senator SPECTER. How old was he?

Ms. HICKLING. If I was from 3 to 11, he was probably 35 to 40, 45.

Senator SPECTER. And it started when you were 3 years old?

Ms. HICKLING. Yes; when we moved into the neighborhood. And this is despite the fact that I guess my mother had been warned and so forth and so on. And the reason I bring it up is because it is so common, it is so common.

As an adult I began after my fourth child was born and my kids started getting to that age where I began to panic if they were in certain circumstances, the people who commit abuse like this typically are, you know, your coaches and Cub Scout leaders, and this is not something that a stranger in a black car drives up and surprises a child.

The statistics I read bear out in the people, the women I've been in groups with as I've worked through this, these are mostly in the family or very close people. The pedophiles themselves are sick people who haven't been caught and so the abuse continues. It is terrifying as a child.

Senator SPECTER. What can you say to the children, if anything? What can you say to the parents of children that age to try to protect them?

Ms. HICKLING. To me, the biggest deal right now would be there has to be like a public disclosure to say, kids, if this has happened to you, if you're being touched where your bathing suit touches your body, for a little kid they don't know that it's not OK to be touched that way.

Parents, publicly we need to say that it's not OK for anybody to touch you there, and if they do, you need to tell on them.

And for our discussion, if the statistics are correct, if one-quarter of the girls, and we're talking those who become pregnant here, these have already been more or less initiated sexually by someone they trust and that's how they feel affection is given. Now, with my neighbor, he was very affectionate to me, he told me he loved me. My uncle, it was kind of a very cruel, violent sort of thing, so I got a real mixed message, it's good, it's bad. But the whole message was I'm bad. And I had to, you know, keep that secret, that's very, very common.

And I have gone through a lot of counseling, and I've been with other people who just affirmed this fact that kids need to get the secret out. The sooner the secret is out, the sooner that the healing can begin to take place.

Now, as we're talking to kids in classrooms, we all go and talk to teenagers, I really believe that this has to just come right up

front, has anybody ever touched you where you feel uncomfortable, you need to speak up and say, don't do that, I don't like that. And if it's an adult—

Senator SPECTER. Don't you have to be more specific than just where you feel uncomfortable?

Ms. HICKLING. I think it's where it begins. Because with my neighbor, I didn't see his penis. What he did to me was very subtle, manipulative. I really don't feel like going into it, but he'd use my body in ways to make himself feel better. As a 3-year-old, I didn't get it. I heard the heavy breathing, I just didn't understand, it's very confusing. But when I was raped, yeah, I saw it, I felt it, and I became terrified.

These are the things that have to be addressed to our children because they do learn about sex, if not firsthand like that, then they learn it through the media, through films, through the Internet and they begin to think that it's normal for other people to be allowed to intrude on their bodies.

Our kids need to be taught boundaries. Much of the abstinence materials, Josh McDoul's "Why Wait," it has a program called Clean Teens that I talked about in that older teenagers teach younger teenagers how far, the question she said, they always say how far is too far, you know. With my kids that we talked about bases, first base, second base, you have to sit down and talk to your teens about this.

I think if they know that you care about them and if you know that they're wanting to have sex, you can stop and say, "What do you really need," and like I was saying, do you need a hug, do you need someone to tell you that you're pretty and you're loved.

A lot of times I was discussing with some teenagers yesterday, they said, "Well, this is not going to cut it with boys to say let's cuddle," but you know what, one of the boys spoke up and said, "That's what I want, I want to be hugged, I want to be held." And they can speak up and say, "I've done this before and I didn't like it, it made me feel bad about myself."

Senator SPECTER. Ms. Scheuring, let's pick up on your comment that you heard marriage was obsolete. How do we deal with that one?

Ms. SCHEURING. In a way I came away from that conversation feeling like this young lady probably did not represent the mainstream today, but in 15 years she probably will be very mainstream in her thinking if things continue as they are, because when you look at the statistics, we really begin to think, gee, maybe marriage is becoming obsolete.

I think a discussion of marriage as part of an abstinence program would be key to talk about the purpose of marriage, the historical meaning of marriage, how do you prepare for marriage, what is the purpose of engagement, those kinds of questions to re-establish for young people.

I was with a group of kids, 15 kids or so in Pittsburgh, and I asked them how many of them thought it was possible to have a good relationship in marriage that lasted their whole life. And only one child, one boy, actually it was a boy, raised his hand out of that whole group. Many of these kids have never seen a model of a good marriage so they think that it will just never happen for them.

Senator SPECTER. I heard an 11-year-old's comment last week, her mother was planning a second marriage. The 11-year-old said, "Don't you think you ought to live with him for a while to see if it works?" Kind of a shocker to me.

Ms. SCHEURING. And the statistics show us that living together will actually increase the chances of divorce and a harder breakup at the end of that divorce.

I think a great study on marriage was the "Sex in America" study that came out in 1993, just gave us some wonderful information about marriage. One of the things that I use with especially young men who do want to cuddle, by the way, is that the most sexually satisfied men in America are men who are in a monogamous marriage. And that usually shocks kids to hear that what they're going for is that satisfaction, and they'll find that only in a monogamous marriage.

Senator SPECTER. Doctor Bradford, how would you evaluate the program which you've had at your hospital? We've allocated the Federal Government some \$499,170, I don't know how we picked these figures, but that's what it was, for the Mercy Hospital Pittsburgh program, money well spent. Could it be spent better? What's your recommendation?

Dr. BRADFORD. Well, I guess it would be hard for me to say it could be spent better elsewhere, but I think probably—

Senator SPECTER. It couldn't be spent better elsewhere?

Dr. BRADFORD. Yes.

Senator SPECTER. How about at Mercy?

Dr. BRADFORD. Other than at Mercy. I think that the way by which you can evaluate the program is to, one, look at the outcomes of teen pregnancies themselves.

Senator SPECTER. You have allocated some funding for Carrick High School, as I understand it.

Dr. BRADFORD. There was programming at Carrick High School.

Senator SPECTER. Three high schools?

Dr. BRADFORD. Right, related to counseling, Boys to Men Youth Programming, Phenomenal Females, which actually, I think, when you visited Carrick, the staff did describe some of that.

We had an opportunity then to work with some of the teens who are working to counsel other teens, identify what happened in their lives.

Senator SPECTER. I'm going to try to visit some of the other schools, too. I was talking to Father Stubna about visiting the archdiocese. We're going to stay very much in touch with the program and see how it works out.

My instinct is to try to increase the funding this year, notwithstanding the budget crunch, we're not planning to take from family planning, but we do think that this is a very high priority.

We have a very unique panel coming up next, a group of students. So while the students come up and the current panel leaves, I want to shake your hands and thank you for joining us.

STATEMENT OF LORRAINE BRADFORD, STUDENT

Senator SPECTER. We have now a group of students from local schools. Lorraine, I'm going to call on you first. Why don't you come a little closer to the center?

Who we have with us today, Mr. Fred Tillman, Mr. Mike Schramm, Mr. Eddie How, Cassandra Russell, Lorraine Bradford, Nkokota Vanda, Brian Schmigeal, we thank you all for coming. I have met with a number of you before on a visit to Carrick High School, and I thank you for coming today.

Ms. Bradford, let us begin with you, if we may. My recollection is that you had a very unusual situation and an unusual personal experience to tell, so thank you for joining us and the floor is yours. Tell us exactly what happened to you.

Ms. BRADFORD. Well, basically what happened—has happened to me is that I'm a teenage mother.

Senator SPECTER. You are a teenage mother?

Ms. BRADFORD. Yes, sir.

Senator SPECTER. And how old are you?

Ms. BRADFORD. I'm 17.

Senator SPECTER. And how long have you been a teenage mother?

Ms. BRADFORD. I've been a teenage mother for 2 years.

Senator SPECTER. Two years. And as I recollect it, you are doing some counseling at other schools as to your own experience, trying to share with others what happened to you so they can be better guided on their own personal conduct?

Ms. BRADFORD. Yes; when I was in high school I went down to Knoxville Middle School with my PSI group and we was talking to them. We basically was talking straight up, nothing else, we talked about just abstinence and we role played.

Senator SPECTER. Now, is that the word you use, abstinence when you talk to 12-year-olds?

Ms. BRADFORD. What do you mean?

Senator SPECTER. Well, you are counseling 12-year-olds; right?

Ms. BRADFORD. Uh-huh.

Senator SPECTER. And where do you counsel those 12-year-olds, where are they?

Ms. BRADFORD. They were at Knoxville Middle School.

Senator SPECTER. Where?

Ms. BRADFORD. Knoxville Middle School.

Senator SPECTER. Knoxville Middle School. And I started to ask you, do you use the word abstinence with them?

Ms. BRADFORD. Abstinence.

Senator SPECTER. Do they know what abstinence means?

Ms. BRADFORD. They should know what abstinence means, yes. When we come in every day, we asked them the meaning of abstinence. They would tell us, we had a saying we would say every day, it's OK to think about sex, it's OK to have feelings about sex, it's OK to think and have attitudes toward sex, but it's not OK to have sex at your age.

Basically we never really—you know, as far as me, because I knew a couple of people that knew me, so they know and they really had a lot of questions to ask, but we wouldn't go into sex or this and that.

Senator SPECTER. How do you begin to instruct children as young as 12 years of age?

Ms. BRADFORD. I have volunteered to be in that, I had heard about it, and yes, you know, because I like talking to kids, you

know, as far as I wanted to be a teacher because I love kids, and I know how it is.

Senator SPECTER. How did you pick the age of 12 as opposed to 14 or 15?

Ms. BRADFORD. They picked that group, I didn't pick that group. That was just the group I had.

Senator SPECTER. And you talked to both boys and girls?

Ms. BRADFORD. Boys and girls.

Senator SPECTER. How many boys and girls have you counseled, have you talked to about sex?

Ms. BRADFORD. I'll say it was like between 25 and 30 boys and girls.

Senator SPECTER. Do you think you're talking to them has had any effect?

Ms. BRADFORD. I do.

Senator SPECTER. Why do you think so?

Ms. BRADFORD. Because like now, I see the boys and girls in my neighborhood. It makes me feel good because they know me now, and they know to talk to me and they can come and ask me a question. Well, this little girl came up to ask me, well, this boy asked to kiss me, and I didn't want to. And I was like, well, how do you feel about that? She was like, well, it made me feel uncomfortable. I told her she's got to let him know she didn't want to do that. It makes me feel that they can come and talk to me.

Senator SPECTER. You had a child when you were 15?

Ms. BRADFORD. Uh-huh.

Senator SPECTER. And what kind of an effect did your having a child at 15 have on your own life?

Ms. BRADFORD. Well, in fact, I couldn't do as much.

Senator SPECTER. Did it interrupt your education?

Ms. BRADFORD. No, it didn't. It didn't interrupt my education, I just couldn't do certain things.

Senator SPECTER. Did you miss any time from school at all as a result of having a child when you were 15?

Ms. BRADFORD. No; I didn't miss any school. I was on home-bound, so I was still getting my education. My teacher came to my house. You know, I got times when I got cold feet where I just wanted to give up, but, you know, I had to do it for my son and for me. I have to finish my education and it has to benefit me, and I have to make a future for my son now.

Senator SPECTER. Well, has it had any sort of a disruptive effect on your life to have had a child at the age of 15?

Ms. BRADFORD. Well, not really. I mean, I have a lot of support.

Senator SPECTER. Do you recommend to other 15-year-old girls to avoid that situation?

Ms. BRADFORD. Yes.

Senator SPECTER. And why do you recommend to other 15-year-old girls that they avoid that situation?

Ms. BRADFORD. Because it cuts out from their—15-year-old girls, they need to be going out, having a nice time, you know, they don't need to be worrying about no kid being sick, they need to be out there experiencing other things than experiencing worrying about a kid.

Senator SPECTER. And did you find that having a child at 15 eliminated your opportunity to have those other experiences of a growing young adolescent?

Ms. BRADFORD. Yes, I did.

STATEMENT OF BRIAN SCHMIGEAL, STUDENT

Senator SPECTER. Brian, tell us a little about yourself. How old are you, young man?

Mr. SCHMIGEAL. I'm 15.

Senator SPECTER. Where do you go to school?

Mr. SCHMIGEAL. Carrick High School.

Senator SPECTER. And tell us a little bit about the program they have at Carrick High School.

Mr. SCHMIGEAL. It's Boys to Men. They teach you how to become men, the transitions from boys to men really.

Senator SPECTER. At what point is there a transition from being a boy to a man, Brian?

Mr. SCHMIGEAL. About high school years.

Senator SPECTER. What age, 15?

Mr. SCHMIGEAL. About that.

Senator SPECTER. And what sort of instructions do they give you on that subject?

Mr. SCHMIGEAL. They tell you how to treat ladies and tell you manners and how to go into job interviews.

Senator SPECTER. What else do they tell you, Brian? You've been here this morning when we've had the hearing on abstinence.

Mr. SCHMIGEAL. Yes.

Senator SPECTER. I saw you sitting over there on one of the front seats, what do you think about this hearing, Brian?

Mr. SCHMIGEAL. I think it would be good to have more education about abstinence.

Senator SPECTER. More education about abstinence?

Mr. SCHMIGEAL. Yes.

Senator SPECTER. Do you get some education about abstinence in your program at Carrick?

Mr. SCHMIGEAL. Yes, I do.

Senator SPECTER. What do they tell you?

Mr. SCHMIGEAL. They tell us to abstain.

Senator SPECTER. They tell you to abstain. What do you think about that?

Mr. SCHMIGEAL. I think it's right because God tells us to abstain.

Senator SPECTER. Do you think that their instructions on abstinence helps young men like you to abstain?

Mr. SCHMIGEAL. Yes, I do.

Senator SPECTER. Why, Brian? I know it's not an easy question, and I'm developing it with you. I'm asking you next, Mike, so think about this. What we're trying to do here is get some idea as to how this abstinence training works. The Federal Government has given a grant to Mercy Hospital of \$500,000, and they are spending a considerable amount at Carrick. What we're trying to figure out is if this really has an impact on a young man of your age, 15, as you go on a transition from being a boy to being a man, what sort of information do they give you on sexuality and how to say no, at least how to say no to yourself and how to abstain.

Mr. SCHMIGEAL. Well, they tell us to stay out of situations that would lead to it.

Senator SPECTER. Stay out of situations. What kind of situations do they tell you to stay out of?

Mr. SCHMIGEAL. Like when it's just a male and a female, staying in groups.

Senator SPECTER. Stay in groups. Have you found yourself in those situations before you had these instructions?

Mr. SCHMIGEAL. Not really.

STATEMENT OF MIKE SCHRAMM, STUDENT

Senator SPECTER. Mike, do you go to Carrick?

Mr. SCHRAMM. Yes.

Senator SPECTER. How old are you?

Mr. SCHRAMM. Fifteen.

Senator SPECTER. You've been here during the course of our hearing this morning?

Mr. SCHRAMM. Yes.

Senator SPECTER. What do you think of the general approach of trying to inform young men of your age about the program of abstinence?

Mr. SCHRAMM. I think it's a great idea.

Senator SPECTER. Think it's a great idea. Why?

Mr. SCHRAMM. Because like whenever the sex education schools they pass out condoms and stuff, that really doesn't help at all.

Senator SPECTER. You say a sex education course does not help at all?

Mr. SCHRAMM. I don't think.

Senator SPECTER. Have you had a course in sex education?

Mr. SCHRAMM. Yes.

Senator SPECTER. What do they teach you differently from what the abstinence course teaches you?

Mr. SCHRAMM. The abstinence course teaches you to wait until you're married, but sex education, it's OK to have sex, but if you do, just protect yourself.

Senator SPECTER. It's OK to have sex, but if you do, protect yourself?

Mr. SCHRAMM. Yes.

Senator SPECTER. Do they tell you it's OK to have sex?

Mr. SCHRAMM. Not really, it's just if you're in a situation where you're having sex, just protect yourself.

Senator SPECTER. Well, what do they tell you about staying out of the situation?

Mr. SCHRAMM. Staying out of it?

Senator SPECTER. Out of a situation where you're likely to have sex.

Mr. SCHRAMM. You mean the abstinence course?

Senator SPECTER. Right.

Mr. SCHRAMM. Just don't get into a situation like that, don't put yourself in a situation where you think there's a chance you will have sex, like a one-on-one situation.

Senator SPECTER. Well, in the abstinence course, do they tell you to abstain, but if you can't, to be safe, or do they tell you just to abstain?

Mr. SCHRAMM. Just to abstain.

Senator SPECTER. Just to abstain. Is it a mixed message, if they say to you abstain but if you can't abstain be safe, is that a mixed message?

Mr. SCHRAMM. Yes; well, yes, I think, yes.

Senator SPECTER. There's quite a discussion going on as to whether the educational program ought to tell you what to do if you can't abstain, whether they really just ought to say to you abstain and let it go at that, try to drive that point home without a mixed message or to say to you abstain, but if you find you can't, then use procedures which will guarantee safe sex.

Now, what do you think, Mike, should the program just do No. 1, say abstain or should it do No. 2, say abstain if you can, but if you can't, have safe sex?

Mr. SCHRAMM. I think it should say abstain, but I think they should tell you why you should abstain and give the good positive reasons for abstaining.

STATEMENT OF CASSANDRA RUSSELL, STUDENT

Senator SPECTER. Cassandra, may we call on you? How old are you?

Ms. RUSSELL. I'm 18, and I'm also a teen parent.

Senator SPECTER. You are?

Ms. RUSSELL. I'm a teen parent of twins.

Senator SPECTER. You're a single parent?

Ms. RUSSELL. Uh-huh.

Senator SPECTER. And how old are your children?

Ms. RUSSELL. They're 2.

Senator SPECTER. You have twins. And what do you have to tell other young women based on the experience you've had of having twins? You had twins when you were 16?

Ms. RUSSELL. Fifteen.

Senator SPECTER. What advice would you have for other 15-year-olds?

Ms. RUSSELL. Well, I'd just basically tell them what I went through and how hard it is to be a teen parent, but the only thing you can do is give them advice, but it's up to them whether they're going to take it or not. They're still going to do what they want to do.

Senator SPECTER. Well, do you think you can have any influence on them as to what they will do?

Ms. RUSSELL. Somewhat, but it really depends upon the individual themselves, just like the programs that we have. I mean, it's good that we have the programs that we have, but it really depends upon the person themselves, if they want to, you know, abstain or not.

Senator SPECTER. When you talk about the programs that you have, are you referring to the programs at Carrick High School?

Ms. RUSSELL. Uh-huh.

Senator SPECTER. Do you think that those programs are helpful in encouraging young people to abstain from teenage premarital sex?

Ms. RUSSELL. Only if they're involved in the program, but it's like they'll draw certain people and, I mean, it doesn't draw every-

body, you know, to the program. But people, you know, who do join the program, it will help them. But everybody doesn't want to join the program because they might think it's too boring or something and they won't get anything out of it.

Senator SPECTER. Do you think the program should be compulsory, like an English program, that you have to take it whether you like it or not, but once you take it, you might learn something?

Ms. RUSSELL. I don't know.

Senator SPECTER. When you talk to young women who are 15 and tell them about your own experience of having twins when you were 15, do you try to persuade them not to go through what you went through?

Ms. RUSSELL. Uh-huh.

Senator SPECTER. You do?

Ms. RUSSELL. Yes.

Senator SPECTER. Why?

Ms. RUSSELL. Because it's a lot of work, and it's a lot on them and they have kids or whatever. And I'm just trying to tell them that there's other things to do besides having sex, there's other ways you can look for love besides having sex.

STATEMENT OF EDDIE HOW, STUDENT

Senator SPECTER. Eddie How, where do you go to school?

Mr. How. I'm a junior at St. Vincent College.

Senator SPECTER. And you've been here during the course of our hearing on abstinence?

Mr. How. Uh-huh.

Senator SPECTER. Do you have a program at your school on abstinence?

Mr. How. I was asked to come because when I was in high school, I worked a lot with the Youth Ministry Program in the Diocese of Pittsburgh and things like that, and that's where I learned about abstinence. And I had the best of both worlds, I went to a public grade school first and then I went to a Catholic high school, so I saw both sides of the spectrum, and they talked about sex education and abstinence.

Senator SPECTER. Did you have sex education at the public school that you went to?

Mr. How. Yes, I did.

Senator SPECTER. Could you tell us just a little bit about what that sex education was about in the public school?

Mr. How. Sure. It was in seventh grade. They broke the class up, the boys were in one room and the girls went in another one, and they just explained to the boys about their body and the girl's body and about having sex, and they did talk a little bit about protection but not very much.

Senator SPECTER. What did they talk to you about protection?

Mr. How. They talked about condoms and birth control, things like that.

Senator SPECTER. What did they say?

Mr. How. That if you're going to have sex, that it's probably outside of a marriage then it's probably best to use that. But they did say just because you're able to have sex now, your body is able to have sex that you shouldn't.

Senator SPECTER. When they taught you about sex in seventh grade did you think that was a little early, or should they have done it sooner?

Mr. HOW. I was kind of indifferent. I don't think it's too early because when you're in seventh grade with just the way kids are, everyone is already talking about it as it is because people have older brothers and you have the older kids in the neighborhood. By the time I got to seventh grade from the neighborhood I grew up in and things like that I already knew a lot about sex, and it wasn't the right stuff, what they were telling me. So I don't think it's too early.

Senator SPECTER. Should they have started sooner, say in the sixth grade?

Mr. HOW. Yes; I think so.

Senator SPECTER. Fifth grade?

Mr. HOW. I think you can explain it as early as you want if you do it correctly so that kids understand.

Senator SPECTER. Do you think it's good to do it early or should you wait until later to explain to students about sex?

Mr. HOW. I think you can explain it—like I don't know if you want to get into the actual intercourse stuff, but I think you can explain how the body works and things like that without saying, you know—

Senator SPECTER. At what age or what grade would you say that you ought to start explanations about the way the body works, as you put it?

Mr. HOW. Probably fourth or fifth grade.

Senator SPECTER. And then you say you had the best of both worlds, you went to the Catholic high school and then you learned abstinence. Tell us a little bit about what they taught you at the Catholic high school.

Mr. HOW. Well, I went to Pittsburgh Central Catholic, and it wasn't really in health class, they didn't talk about it very much, it was more in religion class you learned about abstinence and things like that and the laws of the church. And that's where I pretty much learned about abstinence.

Senator SPECTER. And what did they tell you about abstinence?

Mr. HOW. That it's really just like the best way and like through the Bible and through our religion, of the Catholic religion we're taught to abstain until we're married, and really it makes a lot of sense when you think about it.

Senator SPECTER. And if you were to evaluate the instructions you got in the public schools with the education you got in the Catholic school, how would you evaluate the two?

Mr. HOW. I'd have to say my Catholic education was superior.

Senator SPECTER. Do you think it put you on the right course with the emphasis on abstinence?

Mr. HOW. Yes; because it also turned me on to youth ministry and things like that, and in youth ministry I learned more about it and I actually began to speak to other groups and things like that and give talks about why I chose abstinence and things like that.

Senator SPECTER. What do you do exactly in the youth ministry?

Mr. HOW. I was the youth representative in the diocese of Pittsburgh to Region Counsel Three, and through that I just got asked to give talks at certain things. The youth spoke 3 years ago, I spoke on prolife and sex education and racism and things like that.

Senator SPECTER. So the youth minister goes beyond the sexual part, racism, and other general subjects of concern?

Mr. HOW. Yes.

STATEMENT OF IVA FREEMAN

Senator SPECTER. Iva, how old are you?

Ms. FREEMAN. I'm 18.

Senator SPECTER. And do you go to Carrick High School?

Ms. FREEMAN. Yes.

Senator SPECTER. And have you been a part of the Abstinence Educational Program at Carrick?

Ms. FREEMAN. Yes.

Senator SPECTER. What do you think of the program?

Ms. FREEMAN. It's wonderful. They should have had this sooner, years ago and they should start putting it in the middle schools. Kids nowadays are starting to have sex at a real early age.

Senator SPECTER. You say you had it at the middle school. Can you pull the microphone a little closer to you?

Ms. FREEMAN. I said they should start putting it in middle schools because kids are starting to have sex at a real, real young age now.

Senator SPECTER. And do you think that's a valuable program that young women should have?

Ms. FREEMAN. Yes; and young men.

Senator SPECTER. At what age do you think they ought to start teaching you? You heard Eddie How's comments, what age do you think they ought to start teaching?

Ms. FREEMAN. The fourth or fifth grade, even the third grade.

Senator SPECTER. The fifth grade or even at the third grade?

Ms. FREEMAN. Depending on how you present it to them, yes.

Senator SPECTER. How would you present it to a third grader?

Ms. FREEMAN. You wouldn't present it to them like you would a bunch of high school kids, but you would present it to them on a level that they could understand it.

Senator SPECTER. Do you think the program at Carrick High School is effective in encouraging young men and women to abstain from teenage premarital sex to avoid unintended pregnancies?

Ms. FREEMAN. Yes.

Senator SPECTER. Why?

Ms. FREEMAN. Because they give you examples, like there's a lot of people that's been through our group that's been through the stuff we would probably go through if it wasn't for this program, and they give you examples and present it to you on a level that you can understand.

STATEMENT OF NKOKOTA VANDA, STUDENT

Senator SPECTER. Your name, was that Nkokota Vanda?

Ms. VANDA. Nkokota Vanda, you can call me Nikki.

Senator SPECTER. Why didn't they put that on your nameplate, Nikki? How old are you, Nikki?

Ms. VANDA. Eighteen.

Senator SPECTER. Do you go to Carrick?

Ms. VANDA. I just graduated from Carrick.

Senator SPECTER. Just graduated. And what are you doing now?

Ms. VANDA. I'll be attending Penn State next month.

Senator SPECTER. Penn State, good for you. Did you take part in the abstinence program at Carrick?

Ms. VANDA. Yes.

Senator SPECTER. What did you think of it?

Ms. VANDA. I thought it was wonderful.

Senator SPECTER. Why?

Ms. VANDA. Because it teaches kids how to abstain from sex, and if we do have sex, it teaches us the effects of birth control or whatever to use.

Senator SPECTER. Well, when you say they taught you birth control, how about before birth control, abstinence without the need for birth control?

Ms. VANDA. Well, we just had to abstain.

Senator SPECTER. How do they teach you how to abstain?

Ms. VANDA. Well, they counsel us and they give us their support.

Senator SPECTER. Do they teach you how to say no?

Ms. VANDA. Yes.

Senator SPECTER. How do they do that?

Ms. VANDA. Well, they tell us if you're in a situation, you should let the person know that you don't want to have sex.

Senator SPECTER. And how do you do that?

Ms. VANDA. You tell them.

Senator SPECTER. Just tell them. Does that require some special instructions to tell someone you don't want to have sex?

Ms. VANDA. Well, yes; because you might be scared to tell them, so you might need help and somebody needs to tell you, you know, don't be scared to tell them that you don't want to have sex.

Senator SPECTER. Without being too personal, is that customarily sufficient to avoid the problem?

Ms. VANDA. Yes.

Senator SPECTER. Do they teach you to avoid being in a situation alone with a boy, to be with groups?

Ms. VANDA. Yes, they do.

Senator SPECTER. Do you think overall it's a good program?

Ms. VANDA. Yes; I think it's a great program.

Senator SPECTER. Has it helped you?

Ms. VANDA. Yes.

Senator SPECTER. Has it helped other boys and girls you know?

Ms. VANDA. Well, yes; some and then some it hasn't.

Senator SPECTER. Some it hasn't, but some it has?

Ms. VANDA. Yes.

Senator SPECTER. Why do you think it has not helped some boys and girls?

Ms. VANDA. Because like Cassandra said, the person's going to do what they want to do anyway, what you want to happen. You have your own mind, people can teach you not to have sex, but it's what the individual wants to do.

Senator SPECTER. But while it hasn't helped some, on the other hand, it has helped some?

Ms. VANDA. Yes.

Senator SPECTER. What do you think that difference is? Is it more than just the person's own personal preference or does this course have some effect on molding that person's preference?

Ms. VANDA. Well, I think if they started in like middle schools or elementary schools, maybe it would help mold the young minds to not have sex.

Senator SPECTER. So you think it ought to start earlier?

Ms. VANDA. Yes.

Senator SPECTER. How early do you think it ought to start?

Ms. VANDA. In elementary school.

STATEMENT OF FRED TILLMAN, STUDENT

Senator SPECTER. OK, Fred, you're the last speaker here. How old are you?

Mr. TILLMAN. Seventeen.

Senator SPECTER. Do you go to Carrick?

Mr. TILLMAN. Yes, I do.

Senator SPECTER. What do you think of the program on abstinence at Carrick High School?

Mr. TILLMAN. The program, it's a real nice program that touches young people and tells them to wait until you're married or if you're going to have sex, there's risks after you do it, there's risk involved. So there's a lot of opportunities to a lot of young people. There's a lot that it has to offer.

Senator SPECTER. What do they tell you about the risks involved if you're going to have sex?

Mr. TILLMAN. Basically it tells you about like you can get AIDS and there's transmitted diseases, and it's trying to tell young people it's not OK, like if you're being sexually assaulted, you can talk to somebody at the school.

Senator SPECTER. Do they tell you in the abstinence program about how to protect yourself if you decide to have sex?

Mr. TILLMAN. Yes, they do.

Senator SPECTER. Do you think it's a good idea for them to do that or do you think they just ought to talk about abstinence?

Mr. TILLMAN. I think they should talk about both.

Senator SPECTER. Why do you think that? Some people think, Fred, that the abstinence course just ought to be on that point alone, it's a mixed message to talk about abstinence and to talk about how to protect yourself if you're going to have sex. Why do you think they ought to talk about both?

Mr. TILLMAN. Well, if you're going to have sex, it helps you like prevent pregnancy and prevent transmitted disease, and on abstinence it tells you some people want to do it and you should be protected, some people do it and don't use the condoms or whatever.

Senator SPECTER. Do you think they'd have a better chance to have people abstain if they just talked about abstinence alone without talking about how to protect one's self?

Mr. TILLMAN. Yes.

Senator SPECTER. You think it would?

Mr. TILLMAN. Yes.

Senator SPECTER. You still think it's desirable for them to talk about both?

Mr. TILLMAN. Well, some young people may not have a better understanding about abstinence and you have to go into details, have to take time and stuff, and some people understand better than others.

Senator SPECTER. Well, Fred and Mike and Eddie and Cassandra and Lorraine and Nikki and Brian and Iva, I thank you very much for coming. Is there anything anybody would like to add, anything anybody would like to subtract? Well, I again thank you for coming. I think it's very informative to talk to you about the programs which you have.

I believe the education on abstinence is very, very positive. From what I have seen when I visited your school and talked with you here and talking to other teenagers other places, I think that discussing these matters in an open and frank way is something which is very healthy. Cassandra, you want to say something?

Ms. RUSSELL. Yes; I want to say that I think there should be like more PSI classes. It was a course taken in high school.

Senator SPECTER. You call it PSI?

Ms. RUSSELL. Yes; postponing sexual involvement.

Senator SPECTER. Postponing sexual involvement?

Ms. RUSSELL. I think they should have more classes like that in high school or in middle school, for instance, it was in middle school. The kids would go down to elementary school and they would teach them about postponing sexual involvement. And when we were in high school, we would go down to middle school and talk to them about postponing sexual involvement. So I think they should have more courses like that in school and maybe it will bring down sexual——

Senator SPECTER. Well, Cassandra, I think you pretty well summed it up. If you have more courses, PSI as you say it, postponing sexual involvement, then it will have a beneficial effect, Eddie How is nodding in the affirmative, and we want to find some way at the Federal level where we can do things by persuasion and by education.

As I said earlier, I'm personally very much opposed to abortion. I have grave qualms about whether the Government can control that, but I think the Government can be very helpful on presenting information to try to stop unintended teenage pregnancies, promote education and also we didn't talk about adoption, but Senator Santorum and other Senators have legislation which will give tax breaks to people for adoption. If you have a tax break for oil depletion, we ought to have it for encouraging families. So we thank you very much for coming here.

SUBCOMMITTEE RECESS

We will have a transcript of this hearing for our Subcommittee on Labor, Health and Human Services, and Education, and others will have the benefit to review this testimony. It will help us as we make our allocations which we're about to do in the appropriations process. Thank you all very much and good luck to you.

I appreciate very much everyone being here. The subcommittee will stand in recess subject to the call of the Chair.

[Whereupon, at 10:55 a.m., Monday, July 22, the subcommittee was recessed, to reconvene subject to the call of the Chair.]

ABSTINENCE EDUCATION

MONDAY, JULY 29, 1996

U.S. SENATE,
SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Landisville, PA.

The subcommittee met at 10:50 a.m., at the East Hempfield Municipal Township Building, Landisville, PA, Hon. Arlen Specter (chairman) presiding.

Present: Senator Specter.

NONDEPARTMENTAL WITNESSES

STATEMENT OF REV. ROLAND KEITH SMITH, MINISTER OF UNITED
PENTECOSTAL CHURCH, GREENSBURG, PA

OPENING STATEMENT OF SENATOR SPECTER

Senator SPECTER. Good morning, ladies and gentlemen. Let me thank you for joining us here this morning for a hearing by the Senate Appropriations Subcommittee on Labor, Health and Human Services, and Education.

The session has been delayed just a little bit because of some rainy roads coming in, and I wanted to talk to the members of the media outside because they may be leaving us early, but I am very pleased that you have come in today.

We do have field hearings as part of our budget process in which we are now in a final stage of determining what our allocations will be for the next fiscal year. In my capacity as chairman of the Subcommittee on Health and Human Services, I thought it would be useful to get some expert opinions, and the experts are on both sides of the table here, including the teenagers, on what we can do with the issue of teenage pregnancy.

The problem of abortion generally is one of the most significant in our country. It is the most controversial issue facing America since slavery in the Civil War. I have some misgivings about what Government can do in a forceful sense. I am personally very much opposed to abortion but do not believe it is effective to criminalize abortion. I do not believe that it is effective to work on a constitutional amendment, but I am very much persuaded. I think there is a great deal that we can do on the persuasive line.

America has changed a lot since I was a teenager. Candidly, it has not been all that long, but it is a changed country. Both my parents were immigrants. My brother and my two sisters and I re-

ceived a lot of instruction at home, mainly from example, and we would not have thought of doing anything to embarrass our parents, and my wife and I have raised two sons, now in their thirties, and again, the message is loud and clear about where we have had programs on abstinence. It has been highly effective, and I believe that there are additional funds which can be made available on a priority level to try to work on this issue, and that is what we are going to be taking a close look at.

We have a high school in Pittsburgh, Herritt High School, which has some \$250,000 in funding which has made some real difference on the issue of teen pregnancy. We had a hearing last week in Pittsburgh on the subject. We had one in Washington, and we will be going to Scranton a little later today to have another hearing. And I am very pleased with the outstanding group of witnesses we have today, and I'd like to begin with the Reverend Roland Keith Smith, who is the youth president of the United Pentecostal Church International in Greensburg.

SUMMARY STATEMENT OF REV. ROLAND SMITH

Reverend Smith has been the minister of the United Pentecostal Church for 14 years. In 1983 he was elected youth president of the State of Pennsylvania. He teaches the book, "Worth the Wait," an abstinence-based curriculum for young people in the State. We are going to set the time clock for 4 minutes for opening statements, and that will leave us the maximum amount of time for questions and answers.

Reverend Smith.

Reverend SMITH. My name is Pastor Roland K. Smith, and I have been a minister with the United Pentecostal Church International since 1982. I am currently pastor at New Life Tabernacle in Greensburg, PA, and hold the position of youth president for the United Pentecostal Church International in the State of Pennsylvania.

United Pentecostal Church International is an organization of approximately 3,000 churches in the United States and 50 churches within Pennsylvania. I, along with other youth presidents of the United Pentecostal Church, have started introducing the Worth the Wait Program as an abstinence-based curriculum.

Worth the Wait is designed to teach youth to live a life of moral purity. The material was developed by a gentleman by the name of Ken Gurley in cooperation with the General Youth Division of the United Pentecostal Church. This project is in response to the plague of peer pressure that has swept across North America.

A humanistic message has been aired in the classrooms and through the media claiming that the young people today are helplessly immoral. Sadly, many young people believe the unbiblical message about free sexual expression. As a result, sexual immorality has taken its toll on our generation, clearly proving that free love is not free.

Everyone is not giving in to peer pressure. In fact, among Christian youth, sexual abstinence is the rule, not an exception. In 1994 the Barna Research Group surveyed 3,795 Christian young people from 13 evangelical denominations. Their response was 81 percent of young people surveyed said they did not have sexual intercourse.

I say to this group of people that are here that it is a winnable war against impure sexual impurity.

This past August, in 1995, 68,000 young people signed a commitment to Worth the Wait in Little Rock, AR, and just this past summer I hosted a youth camp in Pennsylvania here where 122 signed a commitment register for Worth the Wait, which is proving to us that this is a winnable war.

The Worth the Wait Program is an introduction. It states that sex is a divine gift to people. God designed sexual intercourse to be shared between two married individuals, and outside of a monogamous marriage, sex can become anything but beautiful.

Sex was a subject that confused the wisest man in scripture, Solomon. Sex was the opponent that humbled the strongest man in scripture, which was Sampson, and sex was a trap that ensnared even a man after God's own heart, and that was David. Simply stated, wisdom, strength, and a past relationship with God are no match for sexual temptations.

Like our denomination, our abstinence program is Christ-centered. We emphasize to our youth with the help and strength of the Lord, they may avoid many pitfalls of sexual activity before marriage.

Worth the Wait is a series designed to teach teens views about sex. Empowered by this knowledge, youth can say yes to God's will and no to many other voices in today's world. When teens fail in the sexual arena, many leave the church and the rest suffer an impaired testimony. When teens succeed in this area, it gives them great confidence that God can take care of all other areas of their lives.

There are four basic sessions in the leader's manual, "Worth the Wait," which I have here today. These are broken down into different categories and chapters. The first session is slaying five sexual myths. It is designed to dispel the lies about sexual matters that are raging through this generation, such as all sex is sinful, everybody is doing it, sex proves your love, sex is harmless, and there is no way back.

We have dispelled these five myths by telling the truth that all sex is not sinful. Not everyone is doing it. Sex does not prove your love. Sex is not harmless, and there is a way back. The next session, life's greatest decision seeks to clarify the end result of the dating process which is marriage.

PREPARED STATEMENT

Senator SPECTER. We will put your whole statement in the record so to the extent that you could summarize.

Reverend SMITH. OK. The basic thing is the Worth the Wait Program is a belief that sex is to be saved for marriage, it is morally right and is biblically based in Worth the Wait.

Senator SPECTER. Thank you very much, Reverend Smith.
[The statement follows:]

PREPARED STATEMENT OF REV. ROLAND KEITH SMITH

My name is Pastor Roland K. Smith. I have been a minister with the United Pentecostal Church International since 1982. I currently pastor at New Life Tabernacle in Greensburg, PA, and hold the position of youth president for UPCI in the state of Pennsylvania.

The United Pentecostal Church International is an organization with approximately 3,000 churches in the United States and 50 churches in Pennsylvania.

I, along with other youth presidents of the United Pentecostal Church International, have started producing the *Worth the Wait* program as an abstinence based curriculum.

Worth the Wait is designed to teach youth to live a life of moral purity. The material was developed by a gentleman by the name of Ken Gurley in cooperation with the General Youth Division of the United Pentecostal Church. This project is in response to the plague of peer pressure that has swept across North America.

A humanistic message has been aired in classrooms and through the media claiming that the young people today are helplessly immoral. Sadly, many young people believe the unbiblical message about free sexual expression. As a result, sexual immorality has taken its toll on our generation, clearly proving that free love isn't free.

Everyone is not giving in to the pressure. In fact, among Christian youth, sexual abstinence is the rule not the exception. In 1994 the Barna Research Group surveyed 3,795 Christian young people from thirteen evangelical denominations. The response was 81 percent of the young people surveyed said that they had not had sexual intercourse. The war against sexual impurity is a winnable war. This past August six to eight thousand young people signed a commitment to *Worth the Wait* in Little Rock, Arkansas. Just this summer at a youth camp that I hosted in Pennsylvania, 122 signed the Commitment Register. This is a winnable war.

INTRODUCTION

Sex is a divine gift to people. God designed sexual intercourse to be shared between two married individuals. Outside of a monogamous marriage, sex can become anything but beautiful.

Sex was a subject that confused the wisest man in scripture (Solomon). Sex was the opponent that humbled the strongest man in scripture (Samson). Sex was a trap that ensnared even a man after God's own heart (David).

Simply stated: wisdom, strength, and a past relationship with God are no match for sexual temptations. Like our denomination, our abstinence program is Christ centered. We emphasize to our youth, with the help and strength of the Lord, they may avoid many pitfalls of sexual activity before marriage.

Worth the Wait is a series designed to teach teens God's views about sex. Empowered by this knowledge, youth can say yes to God's will and no to the many voices in today's world. When teens fail in the sexual arena, many leave the church and the rest suffer an impaired testimony. When teens succeed in this area, it gives them great confidence that God can take care of all the other areas of their lives.

There are four basic sessions in the leader's manual. The first session, "Slaying Five Sexual Myths," is designed to dispel some of the lies about sexual matters that are raging through this generation, such as: (1) all sex is sinful, (2) everybody is doing it, (3) sex proves your love, (4) sex is harmless, and (5) there is no way back. We have dispelled these five myths by telling the truth. All sex is *not* sinful, not everyone is doing it, sex does not prove your love, sex is not harmless, and there is a way back.

The next session, "Life's Second Greatest Decision," seeks to clarify the end result of the dating process: marriage. This lesson stresses the importance of selecting a mate and to provide assistance in this decision, 2,000 adults in a recent *Los Angeles Times* news poll identified a happy marriage as their main goal.

When youth are aware that "each date is a prospective mate," the door for the next session is opened, "Dating: The Worst Thing a Teen Will Ever Love." Here, the spiritual implications of dating are discussed. The objective in this lesson is to assist the Christian youth in their desire to please God in their dating practices.

Finally, there is "A Reminder in Blue Commitment Service." This session deals with moral purity and concludes with a pledge of abstinence until marriage.

Outside of these four sessions, many other ideas are included in this program: Practical suggestions for presenting material; order forms for commitment materials; register for local church commitments; parental interaction guide; student manual; and sample dating policy.

This material represents the cumulative effort of many pastors, youth pastors, ministers, and youth. These sessions can be taught consecutively or modified to suit your preferences.

The material presented to you today is based on the belief that saving sex for marriage is morally right, Biblically based and *Worth the Wait*.

STATEMENT OF REBECCA LOVETT, CASE MANAGER AND YOUTH WORKER WITH THE SCHOOL DISTRICT OF LANCASTER TEEN PARENT PROGRAM, LANCASTER, PA

Senator SPECTER. Our next witness is Ms. Rebecca Lovett, graduated from St. Mary's College with a bachelor's in psychology and sociology, and for the past 4 years has been the director of the Qualified Generation on Parenting Program for the School District of Lancaster's Teen Parent Program. We welcome you here, Ms. Lovett, and look forward to your testimony.

Ms. LOVETT. Good morning. My name is Rebecca Lovett. I am the case manager and youth worker with the School District of Lancaster Teen Parent Program. I am also head advisor of an organization at McCaskey High School called IMPACT, which is an acronym for individuals motivated to promote alternative choices for teens.

IMPACT's belief is prevention is not a condom. I would like to commend Senator Specter for convening this session, because it brings awareness to the importance of abstinence-based education and programming in the public school systems.

I have worked with the Teen Parent Program for 4 years. The program's primary goal is to assist teenagers, teen parents, in their efforts to remain in school. The program has definitely been successful in achieving this goal. However, there is a need to shift gears and focus on prevention, based on the following observations by the four Teen Parent Program members. The first observation is the number of teenage pregnancies has steadily increased. Second, females are becoming pregnant at earlier ages. Third, males impregnating younger adolescents are adults in their twenties, thirties, and older. Fourth, teenage pregnancy had become accepted, almost expected. Fifth, the emotional fallout suffered by the individuals needs to be addressed.

Up until now, the focus had been on teenage pregnancy, but the focus needs to change. As a society, we need to stop treating the symptoms of a disease that I will refer to as ESA or early sexual activity and focus on refining the cure, abstinence-based education and programming, incorporated. In other words, it is going to take the community, the schools and churches, and families to combat this challenge.

Consider the following: The disease, which is ESA or early sexual activity, the symptoms are: pregnancy, sexually transmitted diseases, emotional trauma, homelessness, partner abuse, child abuse, broken relationships, involving family, friends and partners, financial instability, and educational instability. The present treatments for ESA, birth control, abortion, child care provisions, transportation provisions, medical assistance, social service assistance, counseling, shelters, welfare, teen parent programs. These are not the answers to the problem. The cure is abstinence-based education.

Adolescents are aware of the physical consequences of early sexual activity, but they choose to ignore them. Adolescents are not aware of the emotional consequences of early sexual activity until it is too late.

The intrinsic needs to be accepted, to be understood, to be loved, to contribute, and to belong, must be satisfied. In many cases sex-

ual activity occurs to fulfill these needs. The consequences of the choice to become sexually active may in many cases have life-altering negative effects.

Educational programs must change attitudes by giving adolescents reasons why it is healthier to abstain from early sexual activity. The stigma which has been linked with the words abstinence and virginity must be eliminated. At McCaskey High School, IMPACT is attempting to change the attitudes of adolescents and the stigmas that go with those attitudes by encouraging school age children to take a more active role in goal setting, promoting development of healthy personal relationships, promoting positive choices, promoting awareness of problem-solving techniques and decisionmaking processes, learning and practicing self-respect, and learning and practicing self-control, building one's self-esteem, developing and increasing interpersonal skills, encouraging, teaching, promoting positive communication.

PREPARED STATEMENT

In summary, I strongly recommend that what NIKE recommends, that we just do it. Direct funding where it makes a difference.

Senator SPECTER. Thank you very much, Ms. Lovett.
[The statement follows:]

PREPARED STATEMENT OF REBECCA L. LOVETT

My name is Rebecca Lovett. I am a case manager/outreach worker for the School District of Lancaster's TEEN PARENT PROGRAM. I am also co-advisor of an organization at McCaskey High School called IMPACT, which is an acronym for Individuals Motivated to Promote Alternative Choices for Teens. IMPACT's belief is that PREVENTION is not a condom!

I would like to commend Senator Specter for convening this session, because it brings an awareness to the importance of abstinence-based education and programming in the public school systems.

I have worked with the TEEN PARENT PROGRAM for four years. The Program's primary goal is to assist teenage parents in their efforts to remain in school. The Program has definitely been successful in achieving this goal. However, there is a need to shift gears and focus on PREVENTION, based on the following observations by the four TEEN PARENT PROGRAM staff members:

1. The number of teenage pregnancies is steadily increasing.
2. Females are becoming pregnant at earlier ages.
3. Males impregnating younger adolescents are adults in their twenties, thirties, and older.
4. Teenage pregnancy has become accepted, almost expected.
5. Emotional "fallout" suffered by the individuals needs to be addressed.

Consider the following:

Disease: E.S.A. (Early Sexual Activity)

Symptoms: Pregnancy, Sexually Transmitted Diseases, Emotional trauma, Homelessness, Partner abuse, Child abuse, Broken relationships (family, friends, partner), Financial instability, Educational instability

Present Treatments for E.S.A.: BIRTH CONTROL, Child Care Provisions, Transportation Provisions, Medical Assistance, Social Service assistance, Counseling, Shelters, Welfare, Teen Parent Programs, Abortion

The Cure: ABSTINENCE-BASED EDUCATION

Up until now, the focus has been on teenage pregnancy, but the focus needs to change! As a society, we need to stop treating the symptoms of a disease that I will refer to as E.S.A. (Early Sexual Activity) and focus on refining the cure: ABSTINENCE-BASED EDUCATION and PROGRAMMING . . . INC.!

Adolescents are aware of the physical consequences of early sexual activity, but they choose to ignore them. Adolescents are NOT aware of the emotional consequences of early sexual activity until it is too late. The intrinsic needs . . . to be accepted, to be understood, to be loved, to contribute, and to belong . . . must be

satisfied. In many cases, sexual activity occurs to fulfill these needs. The consequences of the choice to become sexually active may, in many cases, have life-altering negative effects.

Educational programs must change attitudes by giving adolescents reasons why it is healthier to abstain from E.S.A. The stigma which has been linked with the words "abstinence" and "virginity" must be eliminated. At McCaskey High School, IMPACT is attempting to change the attitudes of adolescents and the stigmas that go with those attitudes by: Encouraging school-aged children to take a more active role in goal-setting; promoting development of healthy personal relationships; promoting positive choices; promoting awareness of problem-solving techniques and decision-making processes; learning and practicing self-respect; learning and practicing self-control; building one's self-esteem; developing and increasing interpersonal skills; and encouraging/teaching/promoting positive communication.

In summary, I strongly recommend what NIKE recommends: JUST DO IT! Direct funding where it can make a difference!

IMPACT: A TEEN PREGNANCY PREVENTION INITIATIVE AT MCCASKEY HIGH SCHOOL

Program Description:

Statement of rationale: IMPACT addresses a need that is very seldom addressed, with a goal to be proactive rather than reactive: an increase in the promotion of PREVENTION (see Program objectives below). There is an overwhelming need for IMPACT (Individuals Motivated to Promote Alternative Choices for Teens).

Program goals:

To promote the PREVENTION of teenage pregnancy

Program objectives:

To encourage school-aged children to take a more active role in goal-setting

To promote development of healthy personal relationships

To promote positive choices

To promote awareness of problem-solving techniques and decision-making processes

To learn and practice self-respect

To learn and practice self-control

To build one's self-esteem

To develop and increase interpersonal skills

To encourage/teach/promote positive communication

1995-96 Program Activities

IMPACT achieved/did the following this school year:

1. Met every Wednesday during extended homeroom, presenting and involving students in some of the following activities, all focusing on PREVENTION: Video-tapes followed by group discussions; whole-group discussions; community speakers/group discussions; brainstorming ideas to promote IMPACT's message; and active games that were fun and also built cohesiveness and demonstrated the realities of teen pregnancy, the importance of positive relationships and communication, the importance of setting goals.

2. Got students actively involved: Volunteering at an IMPACT booth for Parents' Night; decorating the hall for Homecoming (won FIRST prize); creating a display of IMPACT information in the downtown BonTon store window to explain McCaskey's role in the teen pregnancy prevention effort; painting the banner that hung across Queen Street during Teen Pregnancy Prevention Week; acting/participating in IMPACT THEATER; planning for and participating in TEEN PREGNANCY PREVENTION WEEK activities; and participating in fundraisers (candy, Human-i-tees) advertising the IMPACT message by designing and wearing IMPACT tee-shirts, recruiting new members for 1996-97.

STATEMENT OF ANN MARIE KALLOZ, COORDINATOR FOR THE SEXUALITY EDUCATION PROGRAM AT ST. FRANCIS XAVIER CHURCH IN GETTYSBURG

Senator SPECTER. We now turn to Ms. Ann Marie Kalloz, who has been coordinator for the Sexuality Education Program at St. Francis Xavier Church in Gettysburg since 1984, a registered nurse, and graduate of the Human College, and we thank you very much for joining us.

Ms. KALLOZ. Thank you. Several months ago I went to a meeting which brought together people who are concerned about teen pregnancy in our community. And a few minutes after I arrived, in walked three of my students to be participants. As part of the presentation the facilitator asked us to vote our values and stand in one corner of the room if we agreed with the statement, in the middle if we could neither agree or disagree, and then the other end of the room if we disagreed with the statement.

He read the statement, teenagers today are too promiscuous. Everybody in the room moved to the agree area, that they agreed with the statement except for myself and my three teens. Why? Now, are we unaware of the statistics or are we just plain naive?

Well, I talked to hundreds and hundreds of kids every year, and I cannot consider myself naive because of that. And I certainly do not consider high school juniors as being naive, but we do know something that maybe other people do not know, and that is not all teens are having sex. There are those that are choosing to abstain.

Twelve years ago our school principal in Gettysburg asked me if I would put together a sexuality education program. And being a parent, my first inclination was, well, I would want to be actively involved. So I assumed that other parents would want to do that also. And so our program was developed with this in mind.

And while we wanted our students to be free from unwanted pregnancies, we very much wanted them to learn to so value their sexuality that they would want to choose to wait to have sex, and that they not only would wait to choose, but they would really treat this as an important and valuable part of themselves and treat other people in the same way also.

And so we developed a multifaceted program, first, meeting with our adults and teaching them: How do you talk to your kids about sexuality? What values do you hold that you want to communicate, and how can you communicate them?

We then do classroom presentations, and we spend between 10 and 30 classes a year in first grade through eighth grade with our kids, and that means like 10 classes in first grade working with kids.

Now, when you hear this, you are probably saying, you spend how much time talking about sex? No; we do not. We spend very little of that time talking about sex. What we talk about is, how can you get along in your relationships? How do you communicate without attacking other people? How can you deal with peer pressure? What is the media really telling you? Do you agree with what the media is saying? We talk about values and how to practice them out like forgiveness and commitment and courage; what does this mean? And we talk about the moral values of our church and we talk about good decisionmaking.

The next component of our program which I think is absolutely essential is that we bring parents and kids together to talk about sexuality. It is so much fun to sit and watch kindergartners sitting on their parents' lap enjoying themselves, hearing about what they were like as babies, talking about unborn babies and how they grow and how very special they are, and the excitement is just contagious as you sit there with them.

We do presentations yearly for second, fourth, sixth, seventh, and eighth graders. By the sixth grade we are talking about what expectations do you have for your teen years, and it is really fun to see parents and kids sitting there together discussing their real different expectations of what is going to happen and being able to communicate about that.

By seventh grade we are talking about what does growing up really mean? What are you trying to become? Do you want to be that media image, or is there somebody else that you really admire that you want to look into being?

By eighth grade we are doing our why wait presentation when we talk to parents and kids about that important—and we have parents and kids sitting down together talking about this, and we have people that come in to observe and they are just amazed that you have 13- and 14-year-olds sitting with their parents, talking about sex and having a good time doing it, and it does work.

In our program throughout all of these we have our kids write down their commitments, what do they believe and tell me how you are going to do it, do not just tell me you are going to remain chaste. Tell me what you are going to do to remain chaste.

And so we have gotten so many positive comments from our kids about this, and we are hearing from our area high schools that our kids are different, they stand up in witness to their values and the schools. They are willing to stand up and say, I am waiting, and because of that this year we are going to be implementing Emily's program which she will talk to you about later and how that will work. Where our kids will stand up and be able to have a formal way to talk to their kids in their class about this.

As remembrance of this, teens commit themselves to help each other in our program, and in addition, we encourage parents to give their children rings, which you will probably hear about later also, or a medal to remember this commitment.

Why does our program work? It is multifaceted because we really believe kids need community. They need to know that there are people who believe that waiting is important. They are not alone in this, that there is community support, and they see that, they know what their parents believe, they see that all around them through this program.

What is the primary cause of teen sexual activity? Well, what my kids tell me, those three kids who were at this presentation, right in front of everybody, said it is peer pressure. They believe it is really the perception that everyone is doing it when maybe everybody really is not.

Senator SPECTER. Ms. Kalloz, your full statement will be made a part for the record to the extent you could summarize.

PREPARED STATEMENT

MS. KALLOZ. Sounds good. Our program has been effective in our parent-child sessions, and in our classroom presentation, we do regular evaluations, and our evaluations are over 99 percent positive in both parents and kids. It is working. Our parents learn, kids learn, they are using chastity. And I think the reason is not because of what we are doing but what our parents are doing. And

I think that is a real key that we need to help families deal with this issue together. Thank you.

Senator SPECTER. Thank you very much, Ms. Kalloz.

[The statement follows:]

PREPARED STATEMENT OF ANN MARIE KALLOZ

Several months ago I attended a meeting which brought together people who were concerned about teenage pregnancy in our community. A few minutes after I arrived 3 of my former students who were now in high school arrived to be participants. As part of the presentation the facilitator asked the participants to vote their values as he read several statements. We were instructed to move to one corner of the room if we agreed with the statement, stand in another if we disagreed, and in the middle if we could neither fully agree or disagree. The presenter read the statement "Teenagers today are too promiscuous." Most of those attending moved to the agreement corner with the exception of myself and the three teens I had taught. We stood in the middle. Why? Were we naive? Didn't we know the statistics? After speaking with hundreds and hundreds of kids every year I am hardly naive. And, how naive can high school juniors be? We certainly know the statistics. But we also know that teens ARE making healthy and wise decisions about sexuality. Not all teens are having sex. Many are choosing to abstain!

Twelve years ago Sister Phyllis Simmons, the principal of St. Francis School in Gettysburg, Pennsylvania, asked me if I would put together a sexuality education program for the students at the school. Being a parent, I knew that I wanted to be actively involved with this part of my children's education. And, I felt other parents would want to take an active role with their children also. Our program at St. Francis has been developed with this in mind.

And, while we wanted our students to be free from unwanted pregnancy, we also wanted them to learn to so value their sexuality that they would not only choose to wait to have sexual intercourse but that their actions would reflect a true respect for themselves and others. We asked ourselves how could this be accomplished?

What has developed over the years is a multifaceted program that has several components—adult education, classroom presentations, parent-child programs, and coming this year, a skit and role playing presentation done by teens for teens.

We offer periodic adult education programs that allow parents to think about how and what they want to teach their children. What values do they hold and how can they pass these on? What do kids want to know at what ages?

In addition to these we offer from 10–30 classes per year for children in every grade from grade 1 to grade 8 utilizing a curriculum titled New Creation. Some people may ask—you spend that much time teaching about sex??? Actually very little of this time is spent teaching about the biology of sexuality. In our classroom program we talk about how to communicate effectively and how to deal with peer pressure. We learn to critically view the media. We learn how to treat others and ourselves with respect. We talk about various values and how they are lived out in a practical sense—such as forgiveness, commitment, courage, trustworthiness. We talk about making good decisions. We discuss the moral teachings of our church. All in addition to the biology of sexuality.

In another aspect of our programing, we offer parent-child sessions which utilize a curriculum I developed titled Parents and Children Talk About Sexuality (PACTS). These sessions are held once a year for families with children in kindergarten, and grades 2, 4, 6, 7, and 8. In these programs parents and children sit down together and learn about sexuality on the child's level of understanding. For example in kindergarten families learn about babies growing inside their mothers, listen to a baby's heartbeat, and talk about how special they are. The excitement of the presentation is contagious. The little ones love to sit on their parents' laps and hear about what they were like as a baby. In 6th grade families primarily discuss their expectations for the teen years and the changes of puberty. Differing expectations between parents and their children produce challenging, interesting, and fun discussion. By 7th grade families discuss what growing up really means. What kind of person do the students really want to become and how that may differ from the ideal media personality. We discuss the various moral issues that will be presented over the next two years in the classroom so families can better discuss these issues at home. In 8th grade we hold our Why Wait presentation where parents and teens meet in groups to discuss why it is important to wait to have sex and the practicalities of how to go about waiting. People who have observed these presentations are absolutely amazed at how 13 and 14 year olds who have gone through

our program can sit down with their parents and comfortably talk about sex and even have a good time while they are discussing it.

In our program we encourage our teens to write down their convictions about chastity detailing how they will live these convictions out. We encourage parents to give their children something tangible, for example a ring or a medal, in remembrance of this commitment. We ask our teens to commit themselves to helping each other live out this commitment to chastity.

Teachers from our various high schools tell me our graduates are very comfortable witnessing to their values and their decision to wait to have sex. So this year we hope to provide a forum for our kids to do just that. We will be implementing a program called "Waiting—The Smart Choice" in which our teens will have an opportunity to present to students in our area schools skits and role plays about chastity while witnessing to their decision to wait.

Our program is multifaceted for a reason. Years ago there was a community value system that said it was important to wait to have sex. Some people made poor choices but there was community support for children to make good and healthy decisions. How do we give our children a sense that the community supports chastity in light of a media that stresses just the opposite? I believe we need to show them that there are people who do support the value of waiting. They are not alone.

Parent-child sessions communicate that it is not just my parent that feels this way—there are a whole group of parents that feel that waiting is the smart choice. The church and our teachers are saying the same things. And, so are the teens at the presentations. There is community support for waiting.

What is the primary cause of teen sexual activity? At the community meeting I spoke about at the beginning of this presentation someone asked my three former students what they thought was the cause. Their response was "peer pressure" which they described as the perception that everyone was doing it. Their observation is in line with current research. If this is true, then providing programs which demonstrate peer support, parent support, and community support for chastity should be effective.

Has our program been effective? I have no hard data, primarily because my focus has been on implementing programs rather than research. But I believe we are successful from the comments we receive. Evaluations are taken after each parent-child session and regularly after the classroom program and have been over 99 percent positive from both the children and their parents. But most of all I know we are successful from the comments I hear:

From a parent—"I've learned so much."

From a 5th grader to another—"Sexuality is not something you laugh about, you know."

From a parent—"I was sexually abused as a child and it had always affected my marriage. My marriage is so much better now after finally realizing it wasn't my fault."

From an 8th grader—"I have a question that I asked my mom, she didn't know the answer, so she asked me to ask you and let her know the answer."

From a high school teacher—"Your kids are different. They know what they believe and are willing to witness to it both in words and actions."

From a 20 year old young woman—"I want to thank you for everything you did for me. You'll never know how much you helped."

From a parent—"Your program has really helped. My son is in college now and we can still talk comfortably about sex."

To the high school and college kids who have agreed to publicly witness to their commitment to chastity.

One of my former students, Elizabeth Cleveland, who is now in college recently said in a parish newsletter article, "To me the chastity ring is a visible reminder of my promise to myself, to God, to my future husband. It has become important to me because each time I see it I recommit myself a little more to the value of chastity."

We are being successful. But it is not what I do that brings this success but what our program does to empower families to communicate together about the value of chastity. Parents CAN talk with their children about sexuality. Community and peer support CAN exist. And, teens ARE choosing chastity! I thank you, Senator Specter, for your efforts to promote programs that will assist our children and our families.

BIOGRAPHICAL SKETCH

ANN MARIE KALLOZ

Ann Marie Kalloz is a registered nurse having graduated summa cum laude in 1976 with a BS in Nursing from Our Lady of Angels (now Neumann) College. She has been the coordinator for Sexuality Education Programs at St. Francis Xavier Church in Gettysburg since 1984. In that role she has instructed children, teenagers, and adults using various types of programs.

Ann Marie has developed a curriculum for families of children in kindergarten through 8th grade titled Parents and Children Talk About Sexuality (PACTS). This curriculum was featured on WGAL-TV in an hour long special titled Facing Facts that aired in 1986.

Ann Marie has presented workshops for the Pennsylvania Pro-Life Federation's State Conventions in 1986 and 1990 and the United States Catholic Conference. Annually she presents a workshop at the Washington Theological Seminary. She has done teacher inservices for St. Francis Church, the Diocese of Harrisburg, and Lancaster Catholic High School. She has spoken with numerous church groups about sexuality education. Annually she presents a "Why Wait" workshop for 9th graders and their parents at Delone Catholic High School.

Ann Marie is the mother of five children, ages 8 to 18. Her husband, John, is a physician practicing internal medicine in Gettysburg.

STATEMENT OF FATHER DAVID C. SICOLI, FOUNDER OF COURT, OF PHILADELPHIA

ACCOMPANIED BY:

ANDREW STANTON, JUNIOR AT BISHOP McDIVITT CATHOLIC HIGH SCHOOL, WYNCOTE, PA

GENE DEMBY-AFUM, JUNIOR AT GEORGE WASHINGTON CARVER HIGH SCHOOL FOR ENGINEERING AND SCIENCE, PHILADELPHIA, PA

Senator SPECTER. We now turn to Father David Sicoli, Roman Catholic priest of the archdiocese of Philadelphia. In 1993 he founded the outreach that you call COURT, standing for chaste outstanding urban righteous teens, and Father Sicoli has chosen to utilize this time with a brief statement and then turn to two of the youth witnesses on the panel to talk to Father Sicoli. Thank you for joining us.

Father SICOLI. Thank you, Senator. Really it was the group that was invited here today rather than myself as an individual. I will just give this background. I have been working in the inner city of the archdiocese of Philadelphia for about 13 of my 21 years as a priest.

In the fall of 1993 I gathered some teenagers together to discuss what kind of program would be necessary to reach kids that come from the inner-city type of environment, and out of that was born this group that they call COURT. And I was told by Mr. Bowman that I would yield my time to them, and they are going to require more time to perform for you because that is basically what this is, it is a script.

Senator SPECTER. Fine. We will now call on Mr. Andrew Stanton and Mr. Gene Demby-Afum.

Mr. DEMBY-AFUM. Hello, my name is Gene.

Mr. STANTON. And I am Andrew.

Mr. DEMBY-AFUM. And we love sex.

Mr. STANTON. That is right. How many of you love sex? Well, then, how many of you think it is wrong? Well, it is not.

Mr. DEMBY-AFUM. Not when you love sex in the right way.

Mr. STANTON. Which is when you are married. You see, loving sex does not mean you have to be sexually active. That is not lov-

ing sex in the right way, but waiting until you are married to be sexually active.

Mr. DEMBY-AFUM. It is like building a pyramid brick by brick with the person that you love. You build a strong foundation of caring, understanding, and getting to know the person. And you top your relationship off with——

Mr. STANTON. Sex, the most wonderful gift in the world.

Mr. DEMBY-AFUM. But if you start your relationship off with sex——

Mr. STANTON. You are starting off with a weak foundation, like an upside down pyramid. Instead of getting to know one another and finding out about being there for each other, the whole relationship just revolves around sex. In the end, you will find yourself saying——

Mr. DEMBY-AFUM. Hey, who is this guy or girl that I am giving myself to? I hardly know them, and they hardly know me. See, in the end, you may end up knowing a whole lot about their body, and not know a whole lot of what makes them tick. You definitely do not want to marry this person because you have already given yourself to them for sex.

Mr. STANTON. Not a lot of teens today consider chastity at all. A lot of teens probably laugh at the idea of being chaste. After all, the action is there for the asking, but try to look at it like this——

Mr. DEMBY-AFUM. Chastity is like interest in the bank, building up for that future special someone. Breaking chastity is like wasting or spending the interest on the gift of sex that is intended for someone else.

Mr. STANTON. Some people say safe sex is an OK alternative.

Mr. DEMBY-AFUM. But we are here to tell you that there is no such thing as safe sex.

Mr. STANTON. Having so-called safe sex, it is like shooting dice with your body.

Mr. DEMBY-AFUM. Sometimes you get lucky.

Mr. STANTON. But most of the time you lose.

Mr. DEMBY-AFUM. And once you lose, that is it. You see, some testing shows that condoms fail 15 percent of the time, but guess what? These tests only track defects that cause pregnancy, and today there are a whole lot of things you can get besides pregnant.

Mr. STANTON. That is right. And if your number comes up, and your luck does run out, and you do become part of that 15-percent failure rate, well, you do not just get 15 percent pregnant or you do not just get 15 percent of AIDS, you get 100 percent pregnant or 100 percent AIDS. Now, you go figure it out, that is 20 minutes of pleasure in exchange for changing the rest of your life.

Mr. DEMBY-AFUM. Or it may be costing you the rest of your life.

Mr. STANTON. But there is another side to having sex now. It is not just the physical thing for everyone, it also becomes an emotional investment.

Mr. DEMBY-AFUM. When a girl has sex with a guy, she is making an emotional investment in him. When it is all over and the relationship becomes basically just sex, she becomes jaded.

Mr. STANTON. She becomes very cynical and begins thinking every guy comes to expect some action.

Mr. DEMBY-AFUM. Or some girls will become resentful and carry this resentment, this idea of being used, this feeling of being there to make him happy into every relationship.

Mr. STANTON. Even into a relationship that leads to marriage. And, well, I do not know about you, but I do not want to marry some chick who already resents me for something somebody else did with her.

Mr. DEMBY-AFUM. Remember, there is no condom big enough to protect you from a broken heart, see.

Mr. STANTON. Guys look at having sex a little differently.

Mr. DEMBY-AFUM. See, a lot of guys in our community see having sex as an ego thing.

Mr. STANTON. That is right. Guys see having sex as a passage into manhood. Like they have to unload this package called virginity in order to travel with the men or where they happen to have sex and get someone pregnant just to show their masculinity.

Mr. DEMBY-AFUM. Some people would have you believe that the only question you have to ask yourself is, do I have a condom or not? But let us face it, in the heat of passion you do not exactly slow yourself down and say, whoa, I better stop because I forgot to go to the drugstore and get protection.

Mr. STANTON. As a matter of fact, in a recent survey, 93 percent of sexually active teens said they knew all about condoms and disease and everything, but 67 percent said they did not always use protection because they were swept away by the moment.

Mr. DEMBY-AFUM. See, instead of guys asking themselves, am I going to do this with a condom or not, will the condom even hold up, they need to be asking themselves——

Mr. STANTON. Am I willing to die for this?

Mr. DEMBY-AFUM. Am I willing to bring a baby into this world for this?

Mr. STANTON. Am I really a man because I can have sex?

Mr. DEMBY-AFUM. You know what, it is more a sign of maturity if you are able to control yourself. Remember, an "oops" the night before can cost you your future the morning after.

Mr. STANTON. Well, some people say they need to practice before they get married.

Mr. DEMBY-AFUM. But we are here to ask you, would you say to your best friend, that is the girl I am going to marry, right there, try her out for a while and see how she is in bed?

Mr. STANTON. Now, if you would not do this, and I hope you would not, then what gives you the right to try out somebody who will someday be someone else's spouse?

Mr. DEMBY-AFUM. That is right. You are trying out someone who is not intended for you, and you will not want someone else using the girl or guy that you eventually intended to marry. See, what you have to do is challenge yourself and not be like Spot, the dog.

Mr. STANTON. Now, let me tell you about Spot, the dog. Spot, the dog, is the poster animal of sexual activity. Spot, like any dog, goes into heat, but has no way to reason what he is about to do. He does not stop and think, should I be committed to the French poodle next door before I jump her bones? Will I be faithful? No. Spot does not think of commitment, of using the French poodle to get off on.

He does not stop and think about broken hearts or making puppies or anything like that.

Mr. DEMBY-AFUM. You see, you and I, we have brains that can reason. You and I can be faithful and can be committed, and you and I do not have to go into heat and find someone every time like Spot does.

Mr. STANTON. And if you fail to think with the head on your shoulders, well, then you act no differently than Spot, the dog.

Mr. DEMBY-AFUM. Nothing macho about that.

Mr. STANTON. Woof?

Mr. DEMBY-AFUM. Woof.

Mr. STANTON. Now, I know some of you at this point may be thinking, hey, Gene, Andrew, you guys just seem so——

Mr. DEMBY-AFUM. Handsome.

Mr. STANTON. Good looking.

Mr. DEMBY-AFUM. Athletic.

Mr. STANTON. Smart.

Mr. DEMBY-AFUM. Attractive, good looking, and good looking, and good looking.

Mr. STANTON. Snap out of it, man.

Mr. DEMBY-AFUM. And modest.

Mr. STANTON. OK. Seriously, you guys may be thinking how do we do it?

Mr. DEMBY-AFUM. Why we do it, is it because we cannot get dates?

Mr. STANTON. Or we are afraid of sex?

Mr. DEMBY-AFUM. Or are we just too darn stupid to go for it?

Mr. STANTON. Well, it is none of the above. Like we said before, we love sex, and we love it so much, we are willing to wait for it.

Mr. DEMBY-AFUM. Like we said before, we have some positive reasons for waiting.

Mr. STANTON. First of all, as members of our community, we see too many of our friends out there who are all caught up in what the streets have to offer, including sex.

Mr. DEMBY-AFUM. That is right. You see too many teenage boys carrying beepers and more worried about who they are going with right now than where they are going later on. We see too many teenage mothers pushing around baby carriages and too many teenage fathers who are MIA's, missing in action, while getting action somewhere else.

Mr. STANTON. Well, we cannot afford to be distracted by anything or get into anything that will take our eye off the prize. I mean, society already does not think much of us. They think we have no goals and cannot control ourselves. They think we cannot keep our pants up or our skirts down.

Mr. DEMBY-AFUM. But when you are chaste, I realize that you are somewhat admired in your community.

Mr. STANTON. That is right. And you never see someone admiring you for not being chaste, but before we go into that, kind of like going back to admire things, you know, when Gene and I, we step out of the house to go to school in the mornings, they see me in my nice shoes and my dress shirt.

Mr. DEMBY-AFUM. And see me in my nice little slacks and my sweater——

Mr. STANTON. And they say, yo, Gene, Andrew, where are you guys going?

Mr. DEMBY-AFUM. To school, man.

Mr. STANTON. Dressed like that?

Mr. DEMBY-AFUM. Yes, I am.

Mr. STANTON. See, they see you are going somewhere in life, and it is the same way when you tell someone you are chaste. I mean, on the outside they may be making fun of you——

Mr. DEMBY-AFUM. But on the inside, they admire you for having the strength to be so committed. You never see someone admiring you for not being chaste.

Mr. STANTON. That is right. Like this girl I know. She was good looking and all of that, and everybody wanted to go with her until she started messing around. She got a rep, and she got pregnant. After the first pregnancy, the rep stuck and she got pregnant again. Now she is out of a man, out of a job, out of school with two kids, a third on the way and she is still a teenager herself.

Mr. DEMBY-AFUM. That is a shame.

Mr. STANTON. It is a crying shame.

Mr. DEMBY-AFUM. And Andrew, tell them about truth or dare.

Mr. STANTON. Oh, right. Well, everybody knows what truth or dare is; right? You know how when you were young you would cheat and hold on to whatever was being passed around, just so you could get a chance to do something freaky with the guy or girl you like?

Mr. DEMBY-AFUM. And when you are younger, the game is somewhat harmless.

Mr. STANTON. Yes; but as you come become older——

Mr. DEMBY-AFUM. It is no longer harmless.

Mr. STANTON. You get dared to do some seriously unchaste stuff, like grinding and groping. The whole thing becomes sexual, and you find yourself pressured into doing things that is unchastity.

Mr. DEMBY-AFUM. Both of us and our committee members feel lucky that we got involved in COURT. Before we got all caught up in sex and became just another urban statistic.

Mr. STANTON. Or before we became sidetracked. And you know something? It should be no secret to any of you out there that kids like us are lucky to get one chance in this world. I do not want to bore you with statistics or anything, but you know the score. Let us face it, our world is not exactly colorblind. You get one chance to make it in this world and we will not get another.

Mr. DEMBY-AFUM. You can be sure. And chastity helps us do that.

Mr. STANTON. Well, it is sad to say that these days, even if you got a boyfriend or girlfriend, people just automatically assume you are sexually active.

Mr. DEMBY-AFUM. I know. You could be going out with someone for 2 or 3 weeks, and people just naturally assume that you are getting some action.

Mr. STANTON. That is right. You find yourself dodging the guys on the front steps or ducking the girls. You find yourself lying just to cover up being chaste.

Mr. DEMBY-AFUM. But being in our group will make you feel proud and honest because you are chaste.

Mr. STANTON. That is right. COURT stands for chaste outstanding urban righteous teens. We state right up front that we are chaste and proud of it.

Mr. DEMBY-AFUM. We state right up front that we are outstanding in a world that thinks that premarital sex is OK and expected.

Mr. STANTON. We state right up front that we are urban kids, and nobody better write us off as being lazy, irresponsible kids and automatically having no morals.

Mr. DEMBY-AFUM. We state right up front that we are righteous, righteous because we are chaste, righteous because we are living the commandments of our Lord God, and righteous because we are living the morals of the Catholic Church.

Mr. STANTON. And we state right up front that we are teens and we defy those who define us as sex crazed, hormone popping, irresponsible adolescents.

Mr. DEMBY-AFUM. You see, being chaste is not easy, but it most certainly has its rewards.

Mr. STANTON. And you know something? It is never too late to become chaste again. It is never too late to reclaim your chastity, even if you had done something, shall we say, intimate, before. You can become chaste again, we want you to.

Mr. DEMBY-AFUM. We want you to become a part of our movement.

Mr. STANTON. And we want you to get on COURT with us.

Mr. DEMBY-AFUM. Thank you for listening.

Mr. STANTON. Thanks.

[Applause from crowd.]

PREPARED STATEMENT

Senator SPECTER. Thank you very much, Mr. Andrew Stanton and Mr. Gene Demby-Afum, thank you very much. That is very well done, Father Sicoli, thank you.

[The statement follows:]

PREPARED STATEMENT OF REV. DAVID C. SICOLI

Senator Specter, I appreciate the opportunity to speak on the need for more chastity promotion among our teens. I have worked as a priest for twenty-one years. The majority of my ministry has been among urban, African-American parishioners in the inner city of Philadelphia. I have served as Pastor in some of the poorest sections of our city.

It is from my experience with various youth, that I know of the need to promote an alternative message to the one that inner city teens generally hear when it comes to the area of human development. I found that most pre-teens figure it is a rite of passage to become sexually active, some as early as 11 years old. Just last Wednesday, I had a discussion with a young man whom I taught in elementary school, now a college graduate, who told me he felt he was a late bloomer because he did not have his first sexual encounter until college. He spoke as if there was something wrong with this. And, to tell the truth, the general consensus among today's teens, is that there is something wrong with waiting.

In the Fall of 1993, I was in a position to assemble some teens and begin a discussion on what, if anything, we could do about the problem. These teens met twice a week for six months to analyze, research, and discuss teen attitudes towards sex. They hosted several workshops with other teens to test their research. They then decided to create the project they dubbed C.O.U.R.T., which stands for Chaste, Outstanding, Urban, Righteous, Teens.

In the three years since they first met, C.O.U.R.T. has labored, with all teen volunteers, to deliver their message. While primarily directed toward minority adolescents, we have found that the style of delivery is just as effective among suburban youth. Rather than simply talk to you about their work, we have with us our two

public speakers, who now will show you how they initially deliver and interest their teen audiences in opening up to the concept of chastity.

I have presented, for official testimony, more of the background, the need, and the structure of C.O.U.R.T. This written testimony explains what happens after the initial presentation. I now present to you Andrew Stanton and Gene Demby-Afum.

Senator Specter and colleagues, thank you for the opportunity to speak on a topic that is quite important to us and would become quite important to many teenagers like us. If given the chance to hear that they have alternatives to the current directions in sex education and sexual expectations, they would be more inclined to choose chastity. The idea of chastity, of teens being chaste, has become the butt of MTV jokes, and smirked at by adults on school boards and in the advertising and marketing world.

C.O.U.R.T. does not come before you today laden with statistics. We come before you today to acknowledge that teen sexual activity is rampant, whether teens live in the inner cities or the green suburbs. You have statisticians who can provide you with reams of research indicating the proportions of the problem. Since C.O.U.R.T. is a grassroots, teen-run project, the teen C.O.U.R.T. committee is able to accept the reality of today's teen sexual activity on an experiential basis.

C.O.U.R.T. does come here today to tell you why we became involved in the problem and what we are trying to do about it, as teenagers. The question is not whether the government has done anything already to promote chastity or not. The question is, "Why have teens, especially on city streets, heard only the drum beat of safe sex and condom giveaway programs?" What has filtered down to teens is the promotion of condoms by school districts, by MTV public service commercials, and by special interest groups. Make no mistake about it: government may say, "Abstinence is the best form of birth control." But when that message is undercut by both federally or privately funded programs that promote promiscuity as the majority option, guess which message is really heard by teenagers? Not the first one.

Teens are not dumb. They simply live up, or down, to your expectations of them. Challenge them to be chaste and give them the reasons to be chaste, and they will try to be chaste. Lower the bar, tell them that adults presume they are not chaste, and they will fulfill your presumption. Teens can be responsible. Teens can think of consequences. Teens can learn self-control, given the chance.

C.O.U.R.T. does promote chastity from a moral point of view. In particular, we have developed our program grounded in Catholic moral principals which state that the gift of sexuality is meant for the person you will marry. But our message is far from "preachy." Nor is it limited to those from a particular religious background. Rather, we walk teens through the positive reasons for being chaste—the reasons that will help them become better persons.

Telling teens to "just say no" is not reason enough. Simply saying "God will get you if you break a commandment" is not reason enough. Our research of such authors as Mr. Elijah Anderson, a sociology professor at the University of Pennsylvania, indicates that teen sexuality needs to appeal to a different motive within inner city adolescents. In an article Mr. Anderson wrote for the *Annals of the American Academy of Political and Social Science*, in their January, 1989 issue, he notes that inner city teens will never be discouraged from being sexually active until we reach them with a reason to choose an alternative. He writes, "For many teen boys, sex is an important symbol of local social status . . . Many girls offer sex as a gift in their bargaining for the attentions of a young man. In each sexual encounter, there is generally a winner and a loser. The girls have a dream, the boys a desire. The girls dream of being taken off by a Prince Charming who will love them, provide for them and give them a family. The boys often desire sex without commitment . . . A boy knows what the girl wants and plays the role in order to get her to give him sex . . . To an inner city black male youth [and we also add, to the suburban male teen today], the peer group is paramount. It sets the standards for his conduct; he badly wants to live up to those standards, to look good in the eyes of his peers. The peer group places a high value on sex, especially what many middle-class people call casual sex."

Unfortunately, in the inner city, teens do not hear any other voice than that of their peers. Suburban teens may hear another voice but do not always heed it. Suburban teens may pay lip service to their parents' values, but they flaunt these values when they are with their friends. Too often, the teen who does not reflect his peers' values, feels like a nerd, an outcast. He is made fun of and put down. And he begins to wonder, "Why bother?"

Let's face it. Today's society is not exactly color-blind. High school opportunities, especially in city school systems, often fail to prepare students for advanced careers. Funding for college is harder to come by. Inner city teens see so many adults unemployed or underemployed. It is a sad reality, but, with homicide being the primary

cause of death among urban African-American males, it is no wonder that these frustrated teen fathers wanted to make and leave their mark on the world, while they can. For suburban teens, making a mark may indicate acceptance in a good college. A baby may or may not interfere with their goals. For an urban teen, making a mark translates into making a baby. Furthermore, many teens, especially from minorities, are lucky to get one chance to make it. They can't be distracted. They can't take their eye off the prize for one moment, or they will miss out. AIDS, parenthood, going steady, the heartbreak of breaking up—any one of these, sap a teen's focus and make him say, "Why bother?"

With this in mind, a group of teens sat down three years ago and decided to do something positive. While things like the "V" chip and ratings on CD's and movies are positive steps, let's face it. Any teenager can get a hold of a condom, a raunchy CD, or video. All you need is a friend who has a friend or an uncle, or older brother, or lax parent. What we decided to do, instead of trying to scare teenagers into being chaste, or instead of protesting against some of the stuff that is made today, is something different. C.O.U.R.T. decided to give them the reasons to be chaste, a club to join to help them be chaste, and let them know that there is nothing nerdy about kids who are chaste.

We formed our group, which we named C.O.U.R.T. C.O.U.R.T. stands for Chaste, Outstanding, Urban, Righteous, Teens. We make kids feel OK about being chaste, something that they often have to hide from their peers. We let them know that they are outstanding if they can accept and live the challenge. We target our message primarily to teens who live in urban areas, by using examples from their backgrounds. What we have found is that our approach is just as successful with suburban groups. We let them know that we are righteous about what we are doing. We are righteous in a world that thinks autobiographies like *Bad As I Wanna Be*, are roadmaps to charting you life. And we let them know that our organization is made up entirely of teens who run the whole project. This way they know that teens just like them can be chaste and are being chaste.

Our format is a simple one. We accept an invitation to speak before a youth group, a classroom, any denomination, anywhere teens are present. We give our 20 minute comedic skit and field questions. If teens are interested in learning more about what chastity is, we return to the group and run a workshop on chastity. We use videos, articles, and always discussions, to present our material. Only then, after teens know what we are really about, do we have an initiation ceremony. Then teens form their own local chapter. We stay in contact with the chapters, sending them articles, and letting them know what other kids are doing in the project.

We have spoken before a variety of groups, ranging from church youth groups of varying denominations, to district and county health centers in Philadelphia and its surrounding counties, to high school assemblies, pro-life workshops, and youth conventions as far away as Boston, to name a few. We are willing to travel anywhere we are invited, whether within our state, or across the United States as indicated by our pending trip to speak to a youth rally of 10,000 young people in San Diego, CA.

We come here today to offer testimony to the need to promote chastity and to promote groups like ours as one piece of the solution. What C.O.U.R.T. does, it does through donations and contributions. What we could do, and what other similar groups could do with dedicated funding, would certainly prove cost effective when you consider the money spent on caring for unwed teen mothers, their children, and the spread of diseases throughout the teen population. Whatever help Congress can give us is an investment in the future health and value system of our country. Safe sex and condom promotions write off young people. We are capable of living up to the challenge that chastity, in today's "anything goes" world, presents.

Thank you for your time

BIOGRAPHICAL SKETCHES

REV. DAVID SICOLI

Reverend David Sicoli, a Roman Catholic Priest of the Archdiocese of Philadelphia, has spent thirteen of his twenty-one years as a priest ministering within the African-American Catholic community. Father Dave recognized, both from the vantage of an assistant pastor in charge of parish youth programs, and then as pastor of several different inner city parishes, the need for an alternative message, in teen language, presented by teens themselves, to the sex-saturated culture that has so permeated the world of the inner city. Father sought the type of program that would resonate with young people, give them reasons to join, and help them defer sexual

activity so as to concentrate on futures full of promises instead of broken dreams. To this end, Father formed a committee of teens, in 1993, to explore such a project. The original committee of five teens worked for six months, researching, testing their program and creating its name and format. After the teens determined the need for such a message, analyzed other programs, decided on their target audience of inner city youth, they spent three months creating their presentation and marketing their program. Since then the committee members have changed, the bookings continue to come, and the message is being embraced by teens from differing religious and economic backgrounds. In October, 1994, Father saw the need to form an adult Board of Advisors who now meet periodically to guide the teens. Funding for the project comes from donations at speaking engagements and the generosity of kindly people who want to support the teens' efforts. Father feels that the message transcends the moral underpinnings of the Catholic teaching on sexuality as a gift to be used within the context of marriage. He feels that chastity is yet another piece of the puzzle of helping inner city teens focus on becoming healthy, educated, productive, and happy adults, able to break out of the cycle of poverty that early promiscuity can foster.

ANDREW STANTON

Andrew Stanton, a sixteen year old junior at Bishop McDevitt Catholic High School, Wyncote, PA, is the oldest of seven children. Andrew lives with his parents, Wendy and Patrick Stanton, and his siblings, in Jenkintown, PA. Andrew, who lists his hobbies as basketball and volunteering in the pro-life movement, joined C.O.U.R.T. after his freshman year. While realizing that the C.O.U.R.T. concept was originally directed at urban, that is, inner city youth, he felt its message is just as timely among his suburban peers. Andrew found the time, amidst school work, his employment at his parish church, Immaculate Conception Catholic Church, Jenkintown, and his family, to volunteer for the C.O.U.R.T. teen co-ordinating committee. Andrew began his committee duties as activities co-ordinator and quickly volunteered to be a committee public speaker. Andrew now travels from youth groups to health fairs, delivering the C.O.U.R.T. message. He has given workshops, been on radio, and spoken at venues ranging from 15 to 500 teens. While most of the speaking engagements are concentrated in the Philadelphia area, Andrew has spoken in Boston, and, in August, will speak before a youth rally of 10,000 young people in San Diego, CA. Andrew says, "I see too many of my friends caught up in what the media has to offer and I want to let them know that chastity is a real alternative."

GENE DEMBY-AFUM

Gene Demby-Afum, a sixteen year old junior at George Washington Carver High School for Engineering and Science, part of the magnate school system of the Philadelphia public schools, lives with his mother, Mrs. Jeanette Demby, and his twin sister. Gene enjoys organized soccer, his school based "Light of Carver Fellowship Bible club," and lecturing in his parish church of St. Anthony's, in Philadelphia. Gene decided to join the C.O.U.R.T. teen Co-ordinating committee a year after he attended a C.O.U.R.T. workshop on chastity. While committed to the chastity message from the beginning, he wanted to be certain that he could balance the rigors of being a committee member, as opposed to a C.O.U.R.T. member, with his academic and family commitments. Living in the inner city and seeing the lives of his friends taking irreparable detours because of sex and drugs, he looked for the opportunity to be part of the solution to these vexing problems. In May, when an opening on the committee occurred, Gene felt it was his time. He immediately volunteered to be a public speaker and has done so at a health fair, a city health center, and before youth groups. He, too, will be a public speaker, in August, in San Diego, before 10,000 young people.

STATEMENT OF REV. ROBERT TURNER, BAPTIST CAMPUS MINISTRIES, PENNSYLVANIA AND NEW JERSEY

Senator SPECTER. Now I turn to Rev. Robert Turner, who operates, overseas, the Baptist Campus Ministries across Pennsylvania and southern New Jersey. In 1993 he was support coordinator for True Love Waits, an abstinence education program. He is a graduate of the Southern Baptist Theological Seminary in Louisville,

KY, and was ordained in 1988. Welcome, Reverend Turner, and we look forward to your testimony.

Reverend TURNER. Thank you, Senator. My name is Robert Turner. I serve on the staff of the Baptist Convention in Pennsylvania, South Jersey, and Harrisburg, PA, coordinated the ministries related to college students, families, and the promotion of resources, helping church members to grow spiritually.

Part of my work with families involves my serving as the State contact person for True Love Waits, an internationally known program promoting sexual abstinence among teenagers. And it is in the context of this role I have been invited to address the hearing today.

The problem with teenage pregnancy is a significant one for our Nation. Whereas many attempts to stem this tide have been aimed at preventing conception and disease, we feel that such a focus, in effect, communicates to teens that sexual activity is acceptable for them, ignore the emotional and moral consequences of sex outside of the marriage relationship that can also have devastating effects on young life. The message proclaimed over and over by adults to teens has been sex is OK as long as you are safe. For this reason True Love Waits was born.

True Love Waits is a Christian-based abstinence program for teenage and college students, which began with the Southern Baptist Sunday School Board in Nashville, TN, in April 1993. Surveys showed that even teenagers professing strong religious beliefs and susceptible to the message of safe sex are engaging in sexual activity and need to hear a positive alternative. Our leaders felt that teens would respond to the message if only they were challenged.

The heart of the campaign is a pledge that simply states, believing in True Love Waits, I make a commitment to God, myself, my family, my friends, my future mate, and my future children to be sexually abstinent from this day until the day I enter into a biblical marriage relationship.

No one could imagine the response that followed from this small beginning. Commitment rallies were held that caught the attention of the local and subsequently national media. True Love Waits was featured prominently on such programs as the "Today Show," CNN, and "Donahue," and scores of newspapers, including USA Today, the Washington Post, and the New York Times.

The media seemed fascinated that so many teenagers would be willing to make a commitment to sexual abstinence in a time such as ours.

As the awareness grew, so did the response. Although True Love Waits began as a program for Southern Baptists, word quickly spread to other church groups and denominations. To date, 43 Christian entities and denominations have endorsed the campaign. Hundreds of thousands of young people have signed covenant cards stating the pledge to abstinence. More than 210,000 covenant cards were displayed on the National Mall in Washington on July 29, 1994, one of the largest such displays in the history of The Mall.

A second event occurred this past February in Atlanta as part of a national youth ministers' meeting. This display included 340,000 cards stacked from floor to the roof in the Georgia Dome and beyond, included cards from over 75 countries.

Speaking of other countries, True Love Waits has spread to over 150 nations where the message is having a significant impact. In Uganda the wife of the Prime Minister is the official spokesperson for True Love Waits. Through her influence the Government has given permission for True Love Waits rallies to be conducted in every public school in the country. Uganda's highest health official has stated that True Love Waits may be an important factor in stemming the AIDS epidemic which is rampant in that country.

Here in Pennsylvania many of our Southern Baptist churches have held their own True Love Waits rallies with teens making the pledge. In addition, I regularly receive calls from churches of other denominations seeking information on a campaign. In April 1994, our annual youth convention had True Love Waits as its theme and 600 kids in attendance. Over 350 came forward making the commitment. This was featured on the front page of the Sunday page of the Sunday Patriot-News in Harrisburg the following day.

The USA Radio Network shows True Love Waits as one of the top 10 stories of 1995 because of its impact on the cultural awareness of abstinence. Quite simply put, True Love Waits has become the most widely covered positive story about teenagers in history.

One may question the appropriateness of such a campaign for all people because of its religious context. It is true that True Love Waits is to a degree limited because it involves a promise made to God, but the Gallup organization has tracked a 96-percent belief rate in God among teens in the last 20 years. So most teens would have no problem with the concept of making a promise to God.

PREPARED STATEMENT

What is the message in all of this? The message that young people can make a commitment to abstinence if only they are challenged to do so. Richard Ross, the national director of the campaign states, adult leaders have seriously underestimated the willingness of a large segment of teens to consider the advantages of abstinence. The success of True Love Waits demonstrates that teens can rise above the low expectations that many adults have placed on them. Thank you.

Senator SPECTER. Thank you very much, Reverend Turner. We appreciate your cooperation.

[The statement follows:]

PREPARED STATEMENT OF ROBERT TURNER

My name is Robert Turner. I serve on the staff of the Baptist Convention of Pennsylvania/South Jersey in Harrisburg, Pennsylvania, coordinating ministries related to college students, families, and the promotion of resources helping church members to grow spiritually. Part of my work with families involves my serving as state contact person for *True Love Waits*, an internationally known program promoting sexual abstinence among teenagers. It is in the context of this role that I have been invited to address this hearing today.

This problem of teenage pregnancy is a significant one for our nation. Whereas many attempts to stem this tide have been aimed at preventing contraception and disease, we feel that such a focus in effect communicates to teens that sexual activity is acceptable for them, ignoring the emotional and moral consequences of sex outside of a marriage relationship that can also have devastating effects on a young life. The message proclaimed over and over by adults to teens has been "Sex is OK, as long as you are safe."

For this reason, *True Love Waits* was born. *True Love Waits* is a Christian-based abstinence program for teenagers and college students, which began at the Southern

Baptist Sunday School Board in Nashville, Tennessee, in April, 1993. Surveys show that even teenagers professing strong religious beliefs are susceptible to the message of safe sex, are engaging in sexual activity, and need to hear a positive alternative. Our leaders felt that teens would respond to the message if only they were challenged.

The heart of the campaign is a pledge that simply states: "Believing that true love waits, I make a commitment to God, myself, my family, my friends, my future mate, and my future children to be sexually abstinent from this day until the day I enter a biblical marriage relationship."

No one could have imagined the response that followed from this small beginning. Commitment rallies were held that caught the attention of local, and subsequently national, media. *True Love Waits* was featured prominently on such programs as The Today Show, CNN, and Donahue, and scores of newspapers including USA Today, the Washington Post, and the New York Times. The media seemed fascinated that so many teenagers would be willing to make a commitment to sexual abstinence in a time such as ours.

As the awareness grew, so did the response. Although *True Love Waits* began as a program for Southern Baptists, word quickly spread to other church groups and denominations. To date, 43 Christian entities and denominations have endorsed the campaign. Hundreds of thousands of young people have signed covenant cards stating the pledge to abstinence. More than 210,000 covenant cards were displayed on the National Mall in Washington, D.C. on July 29, 1994, one of the largest such displays in the history of the Mall. A second event occurred this past February in Atlanta as part of a national youth ministers' meeting. This display included 340,000 cards stacked from the floor to the roof of the Georgia Dome and beyond, and included cards from over 75 countries.

Speaking of other countries, *True Love Waits* has spread to over 150 nations, where the message is having a significant impact. In Uganda, the wife of the Prime Minister is the official spokesperson for *True Love Waits*. Through her influence the government has given permission for *True Love Waits* rallies to be conducted in every public school in the country. Uganda's highest health official has stated that *True Love Waits* may be an important factor in stemming the AIDS epidemic, which is rampant in that country.

Here in Pennsylvania, many of our Southern Baptist churches have held their own *True Love Waits* rallies with teens making the pledge. In addition, I regularly receive calls from churches of other denominations seeking information on the campaign. In April of 1994 our annual Youth Convention had *True Love Waits* as its theme. 600 teens and leaders were in attendance, and when the time came to come forward and attach their pledge cards to a focal wall at the front of the auditorium, we estimated that over 350 made the commitment. This event was featured on the front page of the Sunday Patriot-News in Harrisburg the following day.

The message of abstinence is taking a foothold in youth across our land. A Washington Post headline on *True Love Waits* read: "Virginity is New Counterculture Among Some Teens." The New York Times proclaimed: "Chastity is Making a Comeback." CNN news anchors reported recently on a recent downturn in teenage sexual activity, and the *True Love Waits* campaign was identified as a factor. Several state legislatures and scores of local school boards have revised their sexual education policies to mandate an emphasis on abstinence.

The USA Radio Network chose *True Love Waits* as one of the top ten news stories of 1995 because of its impact on the cultural awareness of abstinence. Quite simply put, *True Love Waits* has become the most widely covered, positive story about teenagers in history.

One may question the appropriateness of such a campaign for all people because of its religious context. It is true that *True Love Waits* is to a degree limited because it involves a promise made to God. But the Gallup organization has tracked a 96-percent belief rate in God among teens for the last 20 years, so most teens would have no problem with the concept of making a promise to God.

What is the message in all of this? The message is that young people can make a commitment to abstinence, if only they are challenged to do so. Richard Ross, national director of the campaign, states: "Adult leaders have seriously underestimated the willingness of a large segment of teens to consider the advantages of abstinence." The success of *True Love Waits* demonstrates that teens can rise above the low expectations that many adults have placed on them.

I commend Senator Specter for holding these hearings on such a crucial issue. *True Love Waits* is not the only voice calling out for teenagers to refrain from sexual activity, and all are needed to stem the tide. Federal assistance to support organizations promoting abstinence education will be money wisely spent, for the financial, emotional, and moral cost of teenage sex and children bearing children is simply too

high. We strongly encourage the Senate Appropriations Committee to consider such efforts worthy of assistance.

TRUE LOVE WAITS—A FACT SHEET

What is True Love Waits?

Created and sponsored by the Baptist Sunday School Board—the world's largest provider of religious products and services—*True Love Waits* is an international campaign that challenges teenagers and college students to remain sexually abstinent until marriage. To date, hundreds of thousands of young people have signed covenant cards stating: "Believing that true love waits, I make a commitment to God, myself, my family, my friends, my future mate, and my future children to be sexually abstinent from this day until the day I enter a biblical marriage relationship." More than 210,000 covenant cards were displayed on the National Mall in Washington, D.C., on July 29, 1994, as part of the first *True Love Waits* National Celebration. Approximately 25,000 young people attending DC '94 participated in the event. A second event, *True Love Waits—Thru the Roof*, occurred February 11, 1996, in Atlanta, Georgia, as part of the national youth ministers' meeting *Atlanta '96*. This international display included 340,000 cards stacked from the floor to the roof of the Georgia Dome—and beyond. Over 18,000 youth and youth leaders attended the celebration. The next phase of the campaign is *True Love Waits Goes Campus* (fact sheet attached).

Is the campaign limited to Southern Baptists?

No. While *True Love Waits* was initiated by Southern Baptists in April 1993, participation is open to all interested religious groups. To date, 43 Christian entities have endorsed the campaign: American Christian Cause; Assemblies of God; Baptist World Alliance; Bethel College and Seminary; Caleb Project; The X Factor; Campus Crusade for Christ; Campus Life Magazine; Christian Camping International; Church of God Cleveland; Concerts of Prayer; Evangelical Covenant Church; Evangelical Fellowship of Canada; Evangelical Free Church of America; Every House for Christ; Family of the Americas; Fellowship of Christian Athletes; General Baptist World Headquarters; General Conference Mennonite Church; Grace Brethren Fellowship of Churches; International Pentecostal Holiness Church; Kingdomworks; National Federation for Catholic Youth Ministries; National Network of Youth Ministries; Nazarene Youth International; Open Bible Standard Churches; Pentecostal Church of God; Reachout Ministries; The Salvation Army; Scripture Union; Sonlife Ministries; Student Discipleship Ministries; Student Venture; Summit Ministries; Teen Missions; Wesleyan Church; W.I.S.E.; The Young Continentals; Youth America; Youth Convention of the Mennonite Church; Youth Development, Inc.; Youth for Christ; Youth Specialists; and Youth with a Mission. Well-known Christian authors James Dobson and Josh McDowell and contemporary Christian artists Steven Curtis Chapman, Michael W. Smith, Amy Grant, DC Talk, Petra, Newsboys, Seneca, Out of Eden, Rebecca St. James, Geoff Moore, Lisa Bevell, and others have supported the campaign.

How is the campaign being carried out?

The Sunday School Board has developed support resources for churches and youth organizations interested in conducting the campaign with youth. *True Love Waits Goes Campus Planning Kit* contains information on conducting a local *True Love Waits* emphasis. Youth leaders in churches and Christian student organizations use the kit to plan ways to carry the *True Love Waits* message to campuses. In addition to the national displays in Washington and Atlanta, numerous city-wide and regional rallies have been held. Southern Baptists made the chastity campaign an ongoing annual emphasis by listing February as *True Love Waits Month* on their denominational calendar. Other denominations and religious groups are developing their own plans for participating in the campaign, many using the Southern Baptist plan as a model.

Is True Love Waits spreading to other countries?

Yes. *True Love Waits* has become an international campaign. On the same day American youth gathered for the National *True Love Waits* celebration in Washington, D.C., abstinence rallies took place in Ottawa, Ontario in Canada and Kampala, Uganda in central Africa. In addition, The Baptist World Alliance has carried the campaign's message to its membership of 165 Baptist groups representing more than 38 million Baptists in 150 countries. Campaign materials have been translated into Spanish, French, and Dutch. Over 220,000 international *True Love Waits* covenant cards representing countries on every continent were displayed August 1-6,

1995, during the Baptist World Congress in Buenos Aires, Argentina. Other Christian organizations are also promoting *True Love Waits* in foreign countries.

Want to know more?

Media representatives, call Charles Willis at 615-251-2307.

For general information, call 1-800-LUV-WAIT.

To order the *True Love Waits Goes Campus Planning Kit* and other support resources, call 1-800-458-2772.

To order the campaign materials in other languages, call 703-790-8980.

[From the Harrisburg Sunday Patriot-News, Apr. 3, 1994]

BAPTIST TEENS PROMISE CELIBACY TILL MARRIAGE

(By Phil Galewitz)

CARLISLE—They sang, clapped and swayed to the music. Then they pledged abstinence.

About 600 enthusiastic Baptist youths from Pennsylvania and southern New Jersey, meeting in Carlisle for their annual convention, spent yesterday focusing on a subject traditionally considered taboo for the church: sex.

Don't do it, they were advised.

At least 350 of the teens took the vow of celibacy until marriage, the goal of a Southern Baptist Convention national campaign called "True Love Waits."

The campaign, begun last summer, continues to pick up momentum and support from several denominations and nonchurch organizations. By July, organizers expect about 500,000 teens from across the nation to pledge abstinence in writing.

Church leaders say celibacy is the only answer to reducing the rising numbers of pregnant teens and cases of sexually transmitted diseases, including AIDS. They criticized educators and national health leaders pushing "safe sex," comparing that approach to giving drivers' licenses to kids or handguns to criminals.

While public health officials have been clamoring for church groups to become more active in addressing health and social issues, many question how realistic the chastity goal is at a time when nearly three out of four youths acknowledge having sex before they're 18.

U.S. Surgeon General Joycelyn Elders said in Harrisburg last week that she wishes teens would abstain from sex but said schools and communities have a duty to make sure when teens have sex, they do it responsibly, with a condom.

But convention organizers said there's no room in health education for the message of safe sex. It has to be abstinence, they say.

The teens at the two-day conference, nearly all from religious families, appeared to agree with the abstinence message. But whether the message would work as effectively on non-religious youths is unclear.

"We are not animals, we can control our desires," one boy advised his peers. Another teen told the group they should not look down on their sexually active peers, but rather help them to see the light.

One girl told the attendees that even if they had already had sex, they still could take a vow of celibacy. They have a name for it: "secondary virgins."

Nathan Pogirski, 17, said he plans on remaining a virgin until he marries. Even though he's chosen to attend a Christian college next fall, he realizes the temptations may be great.

"I take this goal part out of fear of diseases but mostly out of religious commitment," said Pogirski, of Hazelton.

The Southern Baptist Convention began the abstinence campaign after studies showed sexual activity was as high among Christian teens as non-Christian teens. Youth leaders said teens would have a difficult time remaining abstinent if not for the faith developed through the church.

"We have to be practical and specific," said Rick Caldwell, a convention speaker who travels the country pushing sexual purity until marriage. "The truth is real maturity is not doing what feels right, but doing the right thing."

Organizers showed the youths a tape of a recent Donahue show, which focused on abstinence and featured Los Angeles Laker star A.C. Green, who has said he will stay a virgin until marriage.

STATEMENT OF EMILY CHASE OF THE INSTITUTE OF CHRISTIAN STUDIES, MECHANICSBURG, PA

Senator SPECTER. We now turn to Ms. Emily Chase, instructor of the Institute of Christian Studies of Mechanicsburg, PA. Her present work involves doing presentations on abstinence through the program. She received her bachelor's degree from Cornell University and her master's from Penn State University. Welcome, Ms. Chase, and we look forward to your testimony.

Ms. CHASE. Thank you. In the interest of time, I think we are going to dispense with the second skit, because I understand you have a busy schedule today. And so I will just go straight into my remarks, if that is all right with you?

Senator SPECTER. That is fine.

Ms. CHASE. And that will leave you more time to interview the young people.

Senator SPECTER. Thank you very much, Ms. Chase.

Ms. CHASE. Young people today are receiving many confusing statements and messages about sex, making some people say sex is great, sex is natural, go for it, enjoy. They hear other people say, no, it is better to wait for sex until marriage, it is more special and you will be really glad you waited.

And you also hear a third message which says, yeah, it is better to wait, but we know you are going to do it anyway, so grab a condom, use a pill, do something to protect yourself. And the message that we communicate is a very clear one, that no matter how much safety equipment they put on their body or in their body, they are still going to be hurt by being sexually active before marriage.

Young people today yearn for us to be honest with them, they deserve honesty. And they know that sexual passions can be controlled. In the State of Illinois a survey was done of high school students, and only 3 to 5 percent of the high school students responded by saying that sexual passions can never be controlled, that means that 95 percent or more are open to a message that teaches them how to be self-controlled. It is very important for us to realize the kind of students that are open to this message.

Young people today already know the facts about pregnancy. They know about disease, they know about birth control, they know about how the parts fit together, but they do not know about the emotional impact of being sexually active. They do not usually use all the information that is in their heads because adolescents tend to make their decisions not with the facts in their head but with their feelings. If it feels good, do it.

When I speak to young people, I am very honest with them, brutally honest with them. I explain that even if they never get pregnant, even if they do not get a disease, they will still be hurt by being sexually active. I focus on the emotional effects of sexual activity before marriage because, for example, I might take a high school student, a young man and ask him to role play telling his mother that his girlfriend is pregnant. The young man does not like that treatment. He squirmed. It is uncomfortable trying to tell your parents that your girlfriend is pregnant. Or I might take a young woman and put her in role play and she has to tell her fiancé that she already has a disease like herpes. She does not like

the embarrassment. How do you bring that subject up? Those feelings are the ones that the students are unaware of, the emotional effects of sexual activity.

For those who have already been sexually active, we encourage them to consider what we call renewed virginity, starting over again. Just because they may have done something in the past does not mean they have to continue doing it. Some of the topics that we receive from our students include things like, this program made me realize it is OK to wait. Everyone tells them they are strange, they are weird, something's wrong with you if you wait.

I was really glad that someone came in and told the class straight up the way it is. Another student said, I am not a virgin, I know I made a mistake. Thanks to your program, I decided to become a renewed virgin. Thank you so much. I thought that I was done, I am a horrible person but now I know I am not.

Let me close by saying clearly that we are not against sex. Sex is a wonderful gift. It is a positive thing. It is designed to enhance intimacy in marriage, and it is designed by a really strong group. And I brought some tape along with me just as a demonstration.

When you bond with a person sexually, when you are sexually intimate with that person, it is like you are glued to that person. And when you break off after being sexually active with that person, it hurts. It hurts. It does not just hurt the young woman, it also hurts the man. Second, impaired memories of that, of the extra relationship.

Sex creates a tremendous bond, a wonderful bond, but the more you bond, you break up, you bond, you break up, you bond, you break up. When you finally meet the partner of your dreams, the bond does not work. Sex is good glue. Our young people deserve to hear the truth about sex and choose to wait for sex until marriage.

Senator SPECTER. Well, thank you very much, Ms. Chase. We will take a few extra minutes and hear your young people in their skit, if you can do that?

Ms. CHASE. At this point they probably—that led into my remarks. It loses its impact, so I was trying to respect your time.

Senator SPECTER. Well, I'd take a few extra minutes, I am sorry, but I did not know that one led to another. Well, why do we not do it, anyway, and you can speak again? Let us hear the skit.

Ms. CHASE. Why do we not do the other one?

Senator SPECTER. I once came into a movie in the middle, I do not do that anymore.

Ms. CHASE. You mean let us tape the beginning?

Senator SPECTER. Let us hear the skit.

Ms. CHASE. OK.

MOM. I am just going to vacuum because this place is a mess. [Vacuum noise.]

CHILD 1. Mommy, Amy is playing in the street again.

MOM. What? Amy is playing in the street again?

CHILD 2. I was not.

MOM. She could not be playing—Amy, where were you just now?

CHILD 2. I was in the yard.

MOM. She was in the yard.

CHILD 1. I saw her, she was in the street.

CHILD 2. Mom, she is lying.

MOM. All right. Wait, wait. You just stand over here, I will handle this. Now, listen, where exactly were you?

CHILD 2. I was in the yard.

MOM. In the yard, the whole time?

CHILD 2. Yeah.

MOM. You never stepped out of the yard?

CHILD 2. Maybe once or twice.

MOM. What color was it underneath your feet?

CHILD 2. Gray.

MOM. Gray. When did we asphalt the front yard? You were in the street, I cannot believe it. You were right, she was in the street. Well, how many times do we have to go through this? I talked to you, your father's talked to you, I even had your health teacher at school talk to you. You are going to get hurt out there.

CHILD 2. I was with my friends, I was OK. We take care of each other, Mom.

MOM. No; we are not going to go through this anymore. Listen, if you are going to play in the street—I do not want you going in the street, but if you play in the street, you are going to be safe. From now on every time you walk out of this house, you are going to be wearing this [indicating]. Come on.

CHILD 2. You are going to ruin my life.

MOM. There it goes, there it is.

CHILD 2. That is really cool.

MOM. Listen, your sister, she is concerned about you. And look, we want you to have this on too, just so this way the trucks and the cars will see you.

CHILD 2. My life is over.

MOM. It is not over. Listen, I am trying to save your life.

CHILD 2. What happens when someone sees me like this?

[Telephone rings.]

MOM. Oh, here we go. I will get that phone later. No; they are Dad's [indicating], but this will protect you when you fall down, you just do not want anyone—come on.

CHILD 2. Mom, I am so—

MOM. You will start a new fashion at school, everybody's going to want one.

CHILD 2. I am going to be so humiliated.

MOM. Will somebody get that phone? Look, you play ball in the street, this is going to protect you. I do not want you playing in the street, but if you play in the street, then there. Do not rip your sister, listen, she cares about you.

CHILD 2. Oh, yeah.

MOM. Oh, I found these. I saw the phone truck outside this morning, I thought this was a great idea. You can put them on the street when you are there, OK? No; listen, that is your sister. And at night you can use this [indicating], and if a mugger comes, you can bop him over the head.

[Child goes after sister.]

MOM. Muggers, not sisters.

CHILD 2. Is this everything?

MOM. That is it.

CHILD 2. Finally?

MOM. You can go out and play now. I do not want you playing in the street, but at least I know you are going to be safe. What are we going to do with that young woman?

CHILD 1. Maybe we should try locking her in the room.

MOM. Locking her in her room? I tried that on Saturday, do you know what happened? She crawled out the window. She almost broke her leg going down the tree.

CHILD 1. How about one of those electronic dog collars?

MOM. An electronic dog collar? You mean like the neighbors use for Fluffy?

CHILD 1. Yes; it worked for the dog. Fluffy used to run all over the neighborhood.

MOM. You mean bury a wire underneath all the way around the edge of the yard, and every time she steps out——

[Noise made.]

MOM. What happened?

CHILD 2. Well, I am sorry. You gave me all this protection, but I still got hurt.

Ms. CHASE. Mixed messages.

[Applause from crowd.]

[The statement follows:]

PREPARED STATEMENT OF EMILY CHASE

Young people today are receiving many confusing messages about sex.

They hear some people say, "Sex is great! It's natural. Go for it. Enjoy!"

They hear other people say, "No, it is better to wait for sex until marriage. It is more special. You will be really glad you waited."

And then there is another message: "Well, yes, it is better to wait for sex until marriage, but we know you are going to do it anyway. So, go ahead, but use some protection. Grab a condom. Use a pill. Do something to protect yourself."

The message we want to communicate today is that "No matter how much safety equipment you put on your body or in your body, you will still be hurt by being sexually active before marriage."

Young people today yearn for us to be honest with them. They know sexual passions can be controlled. In a survey in the state of Illinois, only 3 to 5 percent of high school students said that sexual passions cannot be controlled. That means that more than 95 percent are open to a message that teaches self control.

Young people today already know the facts about pregnancy, birth control, AIDS, and how their parts fit together. But the reality is that, when it comes right down to it, they don't make their decisions based on facts. Adolescents tend to make decisions about sex based on feelings. If it feels good, then do it.

When I speak to young people, I am brutally honest with them. I tell them they will get hurt by being sexually active. I focus on the emotional effects of sexual activity before marriage. Because they often make decisions based on emotions, I use role plays to help them "feel" the consequences of sexual behaviors.

For example, I might take a high school student, a young man, and ask him to role play telling his mother that his girlfriend is pregnant. That's hard. It is very real. And the students squirm as they watch. They don't like the feelings that go along with telling their parents about a pregnancy.

Or I might ask a young woman to role play telling her fiance that she already has herpes. She must look into the eyes of the person she loves and break the news to him. How does it affect their relationship? Again, the students feel the reality of the situation and they do not like it.

Of all the aspects of our presentations on sexual abstinence, students comment most on the role plays. The feelings are real, and if the students choose to wait for sex until marriage they will never have to face these situations.

For those who have already been sexually active, we encourage them to consider "renewed virginity." Renewed virginity is a chance to change direction, to stop being sexually active and start saving yourself for marriage. Just because a person has told a lie once in his life, he doesn't have to keep on telling lies. He can change. Just because a person stole something as a child, she doesn't have to grow up to

be a cat burglar. She can change. In the same way young people can change their sexual behavior.

We are honest. Waiting for sex is not easy. It takes a lot of guts to make this commitment. The college students that I take into the schools with me act as peer role models. They share ideas on how they handle tough situations on dates. They explain why they want to wait for sex until marriage.

Why did I become involved in this area of service? As a pregnancy center counselor, day after day I saw young people whose lives were devastated by the pain of broken relationships and shattered dreams. Many of them were not pregnant. Approximately 70 percent of our pregnancy test results come up negative. They are not pregnant. They may not have a disease. But the pain is still there. I felt there must be a way to head kids off at the pass, to reach them *before* they become sexually active.

So now we speak over 200 times each year in public school classrooms of the Capital area encouraging young people to consider waiting. Some of the comments that we hear are:

"[This program] made me realize it's OK to wait."

"I was thinking about having sex. All my friends do it, but now I know I'll wait."

"It brought up a lot of good points and really made me think about some decisions I have to make."

"Realized other people had the same fears I do."

"It helped me set a few standards."

"Answered a lot of questions I had."

"It opened my eyes to a new perspective. I never viewed virginity as being 'self controlled'."

"They made me think about me and my girlfriend and if I want to be with her the rest of my life."

"It gave me other reasons (besides what I already knew) to wait. I was really glad that someone came in and told the class straight up the way it is."

"I'm not a virgin, and I know I made a mistake, but thanks to your program I've decided to become a renewed virgin. Thank you so much! I thought that I'm done, I'm a horrible person, but now I know I'm not."

"It helped me understand that I should have enough confidence and be secure of myself enough to know that I'm worth waiting for."

Let me close by saying clearly that we are not against sex. Sex is a wonderful gift. It is positive. It was designed to enhance intimacy. It is like a really strong glue, bonding two people together. When you bond sexually and then break up, it hurts. It hurts not just the woman but also the man. And when you go to bond the second time, the glue doesn't work as well. The bond is weaker. Each time you bond and break up, the bond grows weaker and weaker. And when you finally meet the person of your dreams and you marry and you want to enjoy deep intimacy in your relationship, the bond simply does not work as well.

It is not that sex is bad. Sex is good glue. It bonded really well the first time. But if young people ignore the way sex works, they will get hurt. They deserve to hear the truth and choose to wait for sex until marriage.

DEALING WITH PEER PRESSURE

Senator SPECTER. Thank you very much. We see the point pretty clearly, even if it is in inverse order. I will begin the questions with you, Reverend Smith. You talked about peer pressure, and it ties in with something Ms. Chase had talked about, that it is OK to wait, but they did not know.

Now, peer pressure is something we hear a great deal of. Reverend Smith, Pastor Smith, how would you best characterize the effort to deal with that peer pressure, perhaps with counter-peer-pressure?

Reverend SMITH. With counter-peer-pressure, I would present these programs that we have here, trying to get enough of the young people who are feeling peer pressure of today's society, like the gentlemen that were standing here. They are very proud of what they are, as the world is proud of what they have done, or tried to make people think that they are proud of what they have done.

I believe that it is time for youth that has abstained from any sexual conduct to start being proud of what they have done, and that is abstaining. And so therefore, we need to produce a message loud enough, long enough that the peer pressure that they are hearing is here, you are going to do it anyhow, so you might as well have it. We can say, we do not need your condom, we have already made a moral commitment to ourselves, to our God that we are going to abstain.

Senator SPECTER. Well, the dramatizations I think are certainly effective of them, being Mr. Demby-Afum and Mr. Stanton, and Ms. Chase's demonstration was as well.

Ms. Lovett, your comment about assisting and remaining in school, you work with the School District of Lancaster, how extensive are the abstinent educational programs now under way in Lancaster?

Ms. LOVETT. IMPACT, which is the organization that was formed at McCaskey High School started in December 1994, during that school year.

Senator SPECTER. How many students are in abstinence programs at the Lancaster School District?

Ms. LOVETT. Well, that is a word that we do not use at McCaskey High School. It is a city school, a public school. And as I said, there is such a stigma placed with the word abstinence——

Senator SPECTER. What word do you use?

Ms. LOVETT. We call it a teen pregnancy prevention program, for lack of a better word. And 28 students who are——

Senator SPECTER. But abstinence is a bad word?

Ms. LOVETT. It certainly is.

Senator SPECTER. Among the students?

Ms. LOVETT. Among the students because of the peer pressure, if you will, because students do not feel that it is cool to be a virgin or it is not cool to be abstinent.

Senator SPECTER. Or you are preventing teen pregnancies, that is a pretty long way of saying it.

Ms. LOVETT. Well, there are other effects besides the teen pregnancy that need to be dealt with. There is the emotional fallout of becoming sexually active at an early age. There is sexually transmitted diseases. There is a whole gamut of consequences that teenagers are faced with besides teenage pregnancy.

This is a focal point that we started at because we were working with teen parents and now the frustration of seeing the numbers of students who are coming to us and telling us that, yes, I am sexually active and yes, I am now pregnant or possibly pregnant, we decided to put together this organization which involves parenting and nonparenting students. We have students who are abstinent, we have students who are going through a second virginity, and we are all addressing the issue of we can take abstinence, if that is a word that, you know, we choose to use.

Senator SPECTER. I would like to find a better one, that is one of the values of the hearing. Without teenagers in the Senate, and I would like to leave it up to the young people to see if we can find a better word.

Ms. Kalloz, I am fascinated by your comments that you start education in the first grade. You testified about your instruction on

why wait and you were a little more direct. At what point do you talk more to—most directly about the sexual experiences?

Ms. KALLOZ. We talk about sexuality all the way along.

Senator SPECTER. In the first grade?

Ms. KALLOZ. So in kindergarten we are actually talking about unborn babies and how they grow and how special they are and how they are their own personal selves as such at a certain age.

By and up to third grade—we find by third and fourth grade most kids have already heard something about what the act of sex is. And so about in third grade I start getting questions, you know, what is it? They have heard the words. I have even had questions about AIDS in the first grade and homosexuality by third grade.

When we first did our program, I think the biggest shock of everything for all of us parents as you are sitting there with your kids is to find out what they are really thinking. It was a real shock for us. I mean, we thought—as a matter of fact, from week to week as we did programs each week we did a different age level, I had to revise the whole material because we recognized that kids are so further along in not what they knew, but what they wrongly knew, what they thought they knew that was really off base.

And, you know, by fifth and sixth grade I am dealing with issues that they bring up which can include birth control, AIDS. I mean, just about anything you can possibly think of. And at that point as they are addressing it, you can talk about the importance of waiting to have sex right along.

In kindergarten we are even talking about you came to be because your parents loved each other so very much. You know, your mother and your father, we are talking about relationships right from then. By eighth grade we get real specific, and we will talk about birth control. And by seventh grade with the parents we introduce the issue of birth control, and they have an opportunity to look at the various methods, to just see what they are, because I think in letting people be aware of what is out there, my feeling is they suddenly recognize that this is not the salvation of the world, which is what the world has sometimes made it out to be.

Senator SPECTER. Father Sicoli, how widespread do you bring on your traveling groups up here? How many have seen this skit?

Father SICOLI. In the 3 years that they have been together, hundreds of teenagers they have performed in front of and they have started chapters. Some of our diocesan Catholic high schools within the city of Philadelphia—

Senator SPECTER. How do they go over? Are Gene and Andy a pretty good team?

Father SICOLI. They are our latest team, so—they just came on board. They performed in Boston. They are going to be out in youth rally in conjunction with your party's convention in San Diego in 2 weeks.

Senator SPECTER. I am sorry, you can mention the word Republican.

Father SICOLI. It is not sponsored by them. It is a youth rally outside of the convention.

The key with them is that their audience primarily has been an urban audience, and you are dealing with kids that are really not hearing any other message other than what they are getting off the

television program and whatnot. And this gives them a club to belong to, I think that is the key. It is just not coming out and performing, but it is also coming back to do a couple-hour workshop with them. They just did a workshop two Saturdays ago in a Spanish community in north Philadelphia. They now hope to get a chapter started there and then to work with the kids who are in that chapter.

So it is not just the kids gather, hear a message, and then they go home, but they actually have something to join. And your familiarity with the urban environment, I am sure you realize that there are not many people offering clubs and opportunities and things to join for kids, so that is what makes it positive for them.

Senator SPECTER. Reverend Turner, I was interested to hear you talk about possibly preventing the flow of AIDS in Uganda. Tell us just a little more about your activities which reached by far on that subject.

Reverend TURNER. There are people involved in that who know a lot more about that than I do here in Pennsylvania, but I do know that the people in our national office tell me that they have received calls from other countries because there are other countries that the AIDS epidemic is even much more widely spread than it is here in our country.

Senator SPECTER. And they talk about the abstinence in Uganda?

Reverend TURNER. Right. I just learned this this past week myself, and I think that is a testimony to the fact that even this is not a problem, it is just not an American problem obviously. And that people are looking for something that they can get to their young people even in other countries. This is not an American program or a European program or anything, it is something that all teenagers everywhere need to hear.

And so the AIDS epidemic, I think, in Uganda is probably fueling their efforts, trying to say, we need to do something to try to help our young people see that this needs to be changed. And abstinence, you know, we have heard the other testimonies here. People may use condoms, they may not. Abstinence is going to be the best approach, and I think to young people everywhere peer pressure is always a paramount issue. I have to go back sometimes and recall my own teenage years and try to remember how strong an influence that was.

Senator SPECTER. Reverend Turner, how often do you and Ms. Chase practice that?

Reverend TURNER. I found out about it the same time you did, sir.

Senator SPECTER. So that was the first performance and it seemed to work? Ms. Chase, I was impressed by your comment about sex being a wonderful gift. The positiveness will come through in the testimony about elevating sex, not denigrating sex. And the comment that Ms. Kalloz said about sex is a beautiful thing which creates a child out of a relationship, I think that is a very, very, very, very positive factor. Are those two young women your daughters?

Ms. CHASE. No.

Senator SPECTER. Well, I think it is very impressive.

Let me turn now to start with you, Ms. Kitchen. Tell us a little bit about yourself, how old are you and where do you go to school.

Ms. KITCHEN. I am a junior at Delone Catholic High School.

Senator SPECTER. And what do you think about this term abstinence? Is it a turnoff, is there a better term for it than abstinence?

Ms. KITCHEN. I do not find anything wrong with the word abstinence. I am very proud that I have chosen to be chaste until I am married. In fact, I have on my finger, as Ms. Kalloz said in her testimony, a chastity ring. And I have chosen this, it is a heart with a dove inside of it. And I have chosen this symbol as like the Holy Spirit in my heart to help me.

Senator SPECTER. Which school are you in again?

Ms. KITCHEN. Delone Catholic High School.

Senator SPECTER. Where?

Ms. KITCHEN. In McSherrystown.

Senator SPECTER. How many of the young women have taken a similar vow?

Ms. KITCHEN. I have never seen anyone else with an actual ring on, but I know a lot of my friends have the same values and ideas that I do about chastity.

Senator SPECTER. Do you have courses in school which reinforce that value?

Ms. KITCHEN. As freshmen Ms. Kalloz comes and does the Why Wait Program with us, but we talk about it a little bit in our religion classes but not too much.

Senator SPECTER. Do you think the programs are helpful in building up defenses to successfully abstain?

Ms. KITCHEN. Definitely.

Senator SPECTER. Mr. Coffield. And you are a senior at McCaskey High School?

Mr. COFFIELD. Yes.

Senator SPECTER. How old are you?

Mr. COFFIELD. I am 19.

Senator SPECTER. Eighteen?

Mr. COFFIELD. Nineteen.

Senator SPECTER. What do you think about the word abstinence?

Mr. COFFIELD. It is an OK word to use but—

Senator SPECTER. Pull the microphone a little closer.

Mr. COFFIELD. It is an OK word to use, but I would not use it at McCaskey. There is not too many people at McCaskey High School that are abstinent.

Senator SPECTER. Not too many people in McCaskey who are committed to abstinence?

Mr. COFFIELD. Yes; I do not think it is a word that you could use.

Senator SPECTER. Do you have courses which tell the young people at McCaskey High School about staying away from premarital sex?

Mr. COFFIELD. I am not sure. I do not have any courses myself.

Senator SPECTER. Do you think that courses like that would be helpful in making young people think about the issues and the problems of pregnancy or disease?

Mr. COFFIELD. I think it would. We have a thing in school called Reach, we meet every Tuesdays, and there we talk about all different things. And I was on a panel in front of a whole bunch of

my fellow friends from school to let them know what actually is abstinence and why I chose it for myself.

Senator SPECTER. Are you able to persuade them?

Mr. COFFIELD. Yes, I am.

Senator SPECTER. A little bit of peer pressure for abstinence?

Mr. COFFIELD. Yes; in a way. I have a lot of peer pressure, but I can deal with it.

Senator SPECTER. Mr. Kalloz, where do you go to school? Step up to the microphone. Are you related to——

Ms. KALLOZ. Yes.

Senator SPECTER. Funny you have the same last name. Where do you go to school?

Mr. KALLOZ. I just graduated from Gettysburg High School.

Senator SPECTER. Gettysburg High School?

Mr. KALLOZ. Yes.

Senator SPECTER. Well, I guess you have a fair amount of instruction out of school as well as perhaps in school?

Mr. KALLOZ. Mostly in school.

Senator SPECTER. What kind of courses did you get in school?

Mr. KALLOZ. Well, I went to St. Francis for the majority of—well, for my entire grade school education and my—what is the word, junior high education. There we had my mother's Why Wait Program, the whole program they have set up for St. Francis.

Senator SPECTER. Is the instruction helpful, do you think, on trying to lead young people away from premarital sex?

Mr. KALLOZ. Yes; it is very helpful. Everybody like goes through different situations, you know, where you are just faced with problems, people want to have sex or just want to try and convince you to have sex.

Senator SPECTER. Somebody tried to convince you?

Mr. KALLOZ. Yes; this happened to me.

Senator SPECTER. Boy or girl?

Mr. KALLOZ. Girl.

Senator SPECTER. Well, I infer that you resisted or you would not mention it.

Mr. KALLOZ. Yeah. When you go through these like programs, it is like—well, you have got two choices, if you do not have the program, you are going in unarmed. With the program you have learned more about it, you have learned how to avoid situations that can be dangerous. It just helps you. After you go through the program you look at sex as a very precious, special thing.

I remember one activity we did in the Why Wait Program where we passed around a rose. Everybody took one little petal off the rose. As the rose got around, it just sort of depleted and it was not very pretty looking anymore. That is sort of like having sex lots and lots of times, you give a little part of yourself away until it is not special anymore, it is no longer the gift it is meant to be.

Senator SPECTER. Andy Lebo, I see you nodding in the affirmative. Step up to the microphone, Andy, and tell us a little bit about yourself here. You are a graduate of Mechanicsburg Senior High School?

Mr. LEBE. Yes.

Senator SPECTER. And in your senior high school did you have courses on abstinence?

Mr. LEBE. No; we did not. The only course that offered any information on abstinence was our 11th grade health class.

Senator SPECTER. What did you learn there?

Mr. LEBE. We learned very briefly that abstinence is a choice which can be taken, and it is the best choice, but there are also the other choices such as condoms, the pill, diaphragm, and those were talked about in depth a lot more.

Senator SPECTER. What do you think of this word abstinence?

Mr. LEBE. I think it is a word that we should not be afraid of saying. I am abstinent or I am chaste and I am proud, because I have something to give my wife that no one else has ever had.

Senator SPECTER. Well, that is very well put. Mr. Todd Strader, step up and take the microphone. You also are from Mechanicsburg High School?

Mr. STRADER. Cumberland Valley.

Senator SPECTER. Excuse me?

Mr. STRADER. Cumberland Valley.

Senator SPECTER. Cumberland Valley. How old are you?

Mr. STRADER. Seventeen.

Senator SPECTER. Seventeen. Have you graduated from high school?

Mr. STRADER. No; I will be a senior this year.

Senator SPECTER. You will be a senior this year. Well, what do you think about the word abstinence?

Mr. STRADER. I have no problem with it, and I use it and my friends know that is what I am.

Senator SPECTER. Your friends know it? Do they kid you about it a little?

Mr. STRADER. Yeah.

Senator SPECTER. Do you kid them back?

Mr. STRADER. Not really.

Senator SPECTER. How do those conversations go, are they kind of tough?

Mr. STRADER. No; because it is kidding, but they are my friends and they might not agree with it, but they certainly see that—what I feel, I think they respect me some for it.

Senator SPECTER. Do they respect your views?

Mr. STRADER. Yeah.

Senator SPECTER. How many of your friends are abstinent like you are?

Mr. STRADER. Pretty much the ones that are Christians.

Senator SPECTER. Do you think the religious tie is a very important supportive factor?

Mr. STRADER. I think that abstinence is something that is brought around by God but is not necessarily—you do not necessarily need to be religious or a Christian to be abstinent.

Senator SPECTER. Did you have any courses in school which promoted abstinence?

Mr. STRADER. A ninth grade health class mentioned it along with the others like condoms and diaphragms and the pill, but it was not based on abstinence.

Senator SPECTER. Do you think that courses in school on abstinence would help inform young people to be abstinent?

Mr. STRADER. Yeah, I think so.

Senator SPECTER. Do you think that the courses ought to talk about condoms? There is a fair size of debate on that. What do you think, Ms. Kalloz? Some people say that the abstinence courses ought to be directed squarely to abstinence, there ought not to be the alternative of condoms, and some people argue the hormones, et cetera, that support to give information about protection, what is your view?

Ms. KALLOZ. I think it is not helpful to keep kids naive, because I think they are carrying condoms all around them. I have gotten questions about them starting in the third grade. So they hear about it, and I think if we think we can just hide that and not talk about it and mention the words, the kids are not going to listen to us.

Senator SPECTER. Pastor Smith, what is your thought on that subject?

Reverend SMITH. Well, I agree with the fact that we shouldn't keep the message of condoms a secret, but we should share with them the disease of AIDS. And let me back up just a minute, condoms only hold back pregnancies solely for like 15 percent I read somewhere, and if the sperm can get through a condom, then the HIV virus is 450 times smaller than the holes that are in the fibers of the condom. So we need to share the—like this man, Mr. Leap, over there, mentioned, how in his class they spent very little time on abstinence, but they spent a lot more time on different ways of protecting themselves. Well, the reason they do that is because there are so many different avenues that those things do not work, whereas with abstinence, if you do not do it, you have no—

Senator SPECTER. So the comment on condoms in your view ought to be that they are weak and unprotected—

Reverend SMITH. Right.

Senator SPECTER. As opposed to if you are going to do it, use condoms?

Reverend SMITH. Right.

Senator SPECTER. What do you think about all of this, Ms. Castine? How often have you performed that skit? How long have you been on crutches?

Ms. CASTINE. About once a month for the last year, and as far as like the word abstinence, it is not a bad word. The concept is there, but we need to take a more positive view, and by saying sex is beautiful, sex is good in the right context, it can be a wonderful bond between two people and portraying the positive side of it as opposed to saying, no, do not do this, do not do this, do not do this. It would be more effective.

The semantics of it means little to students. When you are honest with them and you are up front with them and you tell them this is the way it is and make no bones about it, they are going to respect your opinions more.

Senator SPECTER. What do you think about instructions on condoms?

Ms. CASTINE. You cannot ignore the fact that they are out there, but I have heard the same statistics about the failure rates. And you need to think also about the fact that birth control is not designed for teenagers, it is designed for adults. Birth control pills are designed for women with regular cycles who have regulated

hormone levels which teenagers do not have. And fluctuations involved can lead to other problems.

I used a birth control method that was way too much for my system. I have four suicide plans left in my head because of the hormone games it played. I was not even—like under 21, I was about 21 when I got married, the oldest teen.

Senator SPECTER. And how old are you?

Ms. CASTINE. Twenty-four. I am Emily Chase's prime example of what not to do.

Senator SPECTER. Would you mind telling us a little bit about that?

Ms. CASTINE. When I was a junior in college, I got pregnant out of wedlock. It was scary, it was hard, it was horrible. I kept my son, and I love him dearly, but I feel like my choices, had they been made better, would have made my life very different.

Senator SPECTER. How old is your son?

Ms. CASTINE. He will be 3 on the 5th. I had to make a lot of sacrifices. I am not pursuing my career right now even though I have a degree.

Senator SPECTER. What career do you have in mind?

Ms. CASTINE. My degree is in family studies, and I would like to get a job in the human services.

Senator SPECTER. Did you finish college?

Ms. CASTINE. Yes, I did. But that was only because of the good will of my friends who watched my child for free so that I could go to classes. It is a sad thing when you got to wait for the babysitter to show up so you can go to college classes.

Senator SPECTER. Does the father support your son?

Ms. CASTINE. Yes; we are now married. We have another child, and I got lucky. I do not have a absentee father for my kids. I have a wonderful father for my kids, but that is not the norm. Teenage fathers are not noted for sticking around. That is a shame. That needs to be addressed too. There is a whole gamut of things that goes with the idea of abstinence, but primary progression would help to regulate the rest of those.

Senator SPECTER. Gene, why do not you step forward? How do you like being a part of that production?

Mr. DEMBY-AFUM. I really enjoy it because prior to my association with COURT. I really did not know that—you only see stereotypes of teenagers that are abstinent.

Senator SPECTER. Andy, what did you think when Gene interrupted you that one time? No; I think it was you interrupted Gene. I am just kidding both of you. I think it was a good skit.

I want to thank everybody for coming in today. This is a subject which really needs, in my view, a great deal of development. When you have so much controversy over the subject of abortion, et cetera, this is something we can all agree on, something we can bring Americans together on.

Senator Santorum and about a dozen other Senators and I have sponsored legislation to try to increase funding on abstinence. I have a very good spot on the Appropriations Committee and have some influence on that. And at the other end of the spectrum, we are talking about tax breaks for adoptions and encourage women to carry to term so that you can have tax breaks for depletion, al-

lowances for oil, why not for families? You have many children who need homes and many couples who would like to have children. So we are trying to defer the expense of adoption through the tax burden.

SUBCOMMITTEE RECESS

I want to thank all of your staff for coming here, for getting you all prepared, and thank you for the skits. Thank you for the drama and the wisdom which we have had here today. This will all be taken down and be part of the official record of the subcommittee. And when I get to Washington later today, I will tell my colleagues what I have seen and heard, so thank you all very much.

[Whereupon, at 12:10 p.m., Monday, July 29, the subcommittee was recessed, to reconvene subject to the call of the Chair.]

ABSTINENCE EDUCATION

MONDAY, JULY 29, 1996

U.S. SENATE,
SUBCOMMITTEE ON LABOR, HEALTH AND HUMAN
SERVICES, AND EDUCATION, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Scranton, PA.

The subcommittee met at 2 p.m., at the Scranton Federal Courthouse Building, Courtroom 2, Scranton, PA, Hon. Arlen Specter (chairman) presiding.

Present: Senator Specter.

NONDEPARTMENTAL WITNESSES

STATEMENT OF MOLLY KELLY, INTERNATIONAL LECTURER ON CHASTITY AND ABSTINENCE EDUCATION

OPENING STATEMENT OF SENATOR SPECTER

Senator SPECTER. Good afternoon, ladies and gentlemen, the Appropriations Subcommittee on Labor, Health and Human Services, and Education will now proceed.

The hearing this afternoon has been set to consider appropriations on the subject of abstinence education in high schools. The issue of abortion has been one of the most divisive in the history of our country, perhaps the most divisive since slavery, and while there are very significant disagreements as to how to handle the problem of abortion with prolife and prochoices at some disparity, some disagreement, the issue of abstinence and I think the issue of adoption is one where all Americans can agree.

I personally am very opposed to abortion. I just do not think that the Government can handle it in a mandatory fashion. But I do think that when it comes to persuasion, there is an enormous area of agreement. Senator Santorum, my principal cosponsor, and 12 other U.S. Senators joined together with me in introducing legislation to increase funding on abstention. In my capacity as chairman of the Appropriations subcommittee, we can make some advances in the interim to increase funding and it is my intention that the funding currently at the national level of \$7 million ought to be increased very substantially to \$12 million this year. Directing ourselves really to teenage sexual intercourse, unintended pregnancies and the abortions which follow in some of the cases, and at the other end of the spectrum, the issue of adoption.

Again, Senator Santorum, my principal cosponsor, and I have introduced legislation to have tax breaks for adoption, a very expen-

sive proposition. If you can have a tax break for oil depletion allowances, why not for adoption. There are so many children in America who are in need of homes and families and many people who would like to have children to adopt. So we are trying to work at both ends—on abstention on one end and on adoption.

SUMMARY STATEMENT OF MOLLY KELLY

We will proceed now to our first distinguished panel. And we will lead with Ms. Molly Kelly, an international lecturer on chastity and abstinence education. She has written the book, "Let Us Talk to Teens About Chastity" and other publications on chastity and titled "Let Us Talk" and "Sexual Roulette." Ms. Kelly speaks throughout the United States and is involved with over 100,000 teens each year.

We will establish the time of 4 minutes for opening statements, which will leave us the maximum amount of time for dialog for questions and answers.

Thank you for joining us, Ms. Kelly, and the floor is yours.

Ms. KELLY. Thank you, and I am very happy to be here and have the opportunity to present to you. I am the mother of eight, the grandmother of nine, and I am, as you said, a chastity educator who travels the country. I speak to 100,000 a year and I have had the privilege of speaking to over 1 million teens and I do it because I believe in their ability to live a chaste life, to practice abstinence, to save sex for marriage, and if they have already had sex, I invite them to start over again and start saving it.

I use the word chastity because it is a more positive word. It deals with the whole person rather than just the sexual act. Although I am very much in favor of abstinence education, I think we need to expound on that word to make sure young people realize that it has to do with what they are willing to put in their minds and come out of their mouths, so to speak.

I am a firm believer in the garbage in, garbage out theory. We tell young people to say no to drugs because it is harmful. I do not want to put sex in that category, negative. I tell them sex is so good, it is worth waiting for, they are so good, they are worth waiting for, and I make sure they realize that I am not talking about the weekend, when I talk about waiting, but rather certainly marriage.

I feel sometimes that it is the adults that have the preconceived built-in failure notion of our young people, the mentality that says they are going to do it anyway so we might as well attempt to save a percentage of them and then the safe sex message is promoted. So much of the materials in public schools emphasizes the pills and the condoms as the protective measures with graphic descriptions of how they work, while the abstinence message is kind of given a half-hearted nod with no suggestions of teaching teens how to say no, but rather saying some of you are going to do it anyway so we will offer you the second best answer. And then we come up with the pills and the condoms.

I would suggest strongly that it is sex that causes pregnancy and sexually transmitted diseases and the emotional consequences, not the failure to use birth control. And I do not think our young people are worth the second best answer, and I do not think we can

put best on anything that may fail, and in the case of AIDS if it fails, certainly it could mean death. I have offered my home to pregnant girls over a course of 7 years. And I can say that what they talk about and the tears they shed over the emotional consequences, fear, frustration, loneliness, anger, rejection, and there is no birth control pill in the world that can shield them from those wounds.

I believe that safe sex is simply giving them the tools to do the very thing that causes the problems we want them to avoid and it has become a self-fulfilled prophecy. If we tell young people that they cannot or do not have to say no as long as they use things that may or may not work, then that is what our young people will do, some of them, and it translates to them do not take drugs, you can control yourself, do not drink, you can control yourself, but when it comes to sex, we are not sure you can control yourself. So girls, make sure you use a drug, and the birth control pill is indeed a prescription drug.

Some of the young people have come up to me after assemblies. One girl told me she was going to rewrap her gift, start over again. A young lad in Orlando, FL, came up to me with a big smile and said, you did not drop the bomb at the end of your talk. I said, what does that mean? He said, you did not offer us condoms at the end of your talk. To him, that was a mixed message and destructive. We have a group in the area called C.O.U.R.T., Chaste Outstanding Urban Righteous Teens, started by two African-American teenagers, many more in it now in Philadelphia. They promote abstinence among their friends because the inner-city schools in Philadelphia, nine of them, actually offer condoms in the schools and these young people felt insulted.

PREPARED STATEMENT

I am an abstinence cheerleader and I believe that being on title 20, and seeing such programs as Sex Respect, Teen Aid, Teen Choice funded, I know that they can be successful. I am here really simply to urge you and thank you for your interest in young people and to urge you to continue this. That we will get abstinence education centered 100-percent abstinence in every school because every young person sitting in every seat is worth the 100-percent answer, the guarantee, saved sex rather than the safe sex lie. We have got to promote that if we want healthy, happy young people. Thank you, Senator.

Senator SPECTER. Thank you very much, Ms. Kelly, for your very forceful testimony.

[The statement follows:]

PREPARED STATEMENT OF MOLLY KELLY

Good afternoon. I am honored and excited to have this opportunity to address this Senate Appropriations Committee on the importance of funding ABSTINENCE CENTERED EDUCATION.

Let me begin by giving you a thumbnail sketch of WHO I am, WHAT I do, and WHY I do it. I am Molly Kelly, the mother of 8, the grandmother of 9, the widow of the late Dr. Jim Kelly, a Philadelphia physician who believed in young people, and wanted to help them be healthy and happy, but his life was cut short by a tragic sledding accident. I am a lover of young people and have the privilege of speaking to over 100,000 each year throughout the United States, Canada, and indeed the world. This time last year I was in Australia where I had the privilege of speaking

in 17 cities, to over 13,000 teens. And the reason I do all of this is because I believe in them and in their ability to live chaste lives . . . to practice abstinence . . . to save sex for marriage, and if they have already had sex, I invite them to start saving again! I am known as the CHASTITY LADY!

I use the word CHASTITY because it gives young people boundaries, limits, and it has to do with the whole person, not just the sexual act. I definitely believe in teaching young people abstinence, but I think we need to elaborate on that word so that it will include such things as what they are willing to put in their minds, via the movies, television, CD's, and radio, and also what they allow to come out of their mouths. I am a firm believer in the "garbage in, garbage out" theory.

We tell young people to SAY NO TO DRUGS because drugs are harmful, whether they are married or single. I do not like to put sex in the negative category. Using drugs to get high is wrong, sex is not wrong. But using people . . . having sex with someone because it feels good and involves no commitment, is wrong and harmful.

My message to teens is a positive one. I tell them that THEY ARE SO GOOD, THEY ARE WORTH WAITING FOR . . . and that SEX IS SO GOOD, IT'S WORTH WAITING FOR. AND I assure them that it's not the weekend I'm talking about as far as waiting, but MARRIAGE!

I find that it is too often the adults who cave in on the kids because of a pre-conceived built-in failure notion of them . . . the "What else can we do because they're going to do it anyway" mentality, "so let's save some of them by teaching them to use 'protection' when they have sex."

Much of the material used in public school health classes, that I have seen, or been apprised of, have emphasized the "safe sex" message, which promotes pills and condoms as protective measures . . . showing them pictures of the apparatus, and graphic descriptions of how they work, while the abstinence message is given a half-hearted nod, with no pictures, no suggestions on how to SAY NO, and no talk of positive peer pressure. Instead, it tells them, "While abstinence is the only 100 percent protection, we know that some of you are going to engage in sex anyway, so here is the second best answer," and the teens are then encouraged to use the tools to have sex, when everyone knows that IT IS SEX THAT CAUSES PREGNANCY, SEXUALLY TRANSMITTED DISEASE, AND EMOTIONAL DAMAGE, NOT THE FAILURE TO USE PILLS, CONDOMS AND DEVICES!

And since when are our young people worth the 2nd best answer! And, can we put the word *best* on things that have a known failure rate, and in the case of AIDS, the failure could mean DEATH! Doesn't that sound like sexual roulette to you!

"Safe sex" does not ask young people to change their sexual behavior and therefore the statistics on teen pregnancy (1.2 million each year); teens with STD's (3 million each year); teen abortions (400,000 each year); and teens with the deadly AIDS virus (now the No. 1 killer of young adults in the United States); not to mention the devastating emotional damage to teens from engaging in premarital sex; will not decrease, but rather increase because too many adults want to treat the problem rather than solve it. Promoting "safe sex" is GIVING THEM THE TOOLS TO DO THE VERY THING THAT CAUSES THE PROBLEMS WE WANT THEM TO AVOID."

And, it is an insult to their integrity, an assault on their character, and it has become a self-fulfilled prophecy. If you tell a child he is ugly, he thinks he's ugly. If you tell a child she is dumb, she feels dumb. And, if we tell a generation of young people that they can't SAY NO, or that they don't have to as long as they use "protection" that may or may not work, then the results are and will continue to be devastating.

Senators, here's how it translates to teens.

They hear a health teacher tell them:

"Don't take drugs, you can control yourself!"

"Don't drink, you can control yourself!"

"Don't smoke, you can control yourself!"

"But when it comes to sex, you can't control yourself! Guys, use a condom, and girls, use a drug!" The birth control pill is a drug . . . a prescription drug.

And if this sounds confusing . . . it is!

I'd like to insert here that I have offered my home to 5 pregnant girls over a course of 7 years, and I can tell you that the tears they shed were . . . fear, frustration, anger, loneliness, rejection, heartbreak, despair . . . and all the condoms and the birth control pills in the world can't protect them from those wounds.

I would like to share with you what some teens have said to me after my talk. One young man asked me if I had a video. He told me that his Mom had died and that I reminded him of her, and he wanted his little brother to hear what his mother would have said. A young black teen in Orlando, Florida, told me that he was surprised that I didn't "drop the bomb" at the end of my talk. When I asked him

what he meant, he said, "You didn't offer us condoms at the end." He saw that as a mixed message, and a destructive one. One young girl came up to me and said, "Thanks, I'm going to rewrap my gift and start saving it again."

There is a group of African American teens in Philadelphia who call themselves, C.O.U.R.T., CHASTE, OUTSTANDING, URBAN, RIGHTEOUS TEENS, and they formed because 9 public schools in the inner city began to offer condoms in schools, and these kids felt insulted!

I am a one shot deal to some people, but I see myself as a cheer leader for abstinence. I have been the kickoff speaker for the "It's Great To Wait" Program in South Carolina, and the "Campaign For Our Kids" abstinence program in Indiana. I was a grant reviewer for the Title XX Program that funded such great abstinence programs as "Sex Respect," "Teen Aid," and "Teen Choice," and I work closely with Kathleen Sullivan and her very successful "Project Reality" abstinence program. In fact, Kathleen just told me that they have 9,000 teens signed up for the program this fall.

We need programs like these that teach young people to respect their sexuality and the sexuality of everyone they meet. Teens need the tools to SAY NO and these programs do that. I urge, implore and beg you to fund abstinence education so that every young person in every single school can learn that they are worth waiting for!

I have attached to my testimony some just 3 of the over 1,000 letters I have received from young people. Also I'd like you to see the two brochures I have written for teens, and the chastity pledge cards I give out. The one that says God is for the schools that teach religion, and the one that leaves out God's name is for the public schools . . . and may I say that even though I do not mention God's name in public schools, the message is the same. We want our young people to grow up happy and healthy, regardless of their religion, ethnic background, age, sex, or place of residence. ABSTINENCE/CHASTITY IS GOOD FOR ALL YOUNG PEOPLE!

[CLERK'S NOTE.—The brochures and pledge cards do not appear in the hearing record, but are available for review in the subcommittee files.]

LETTER FROM 10TH GRADE STUDENT

DEAR MRS. KELLY: Your presentation on January 3rd. You have made a complete change in my life. I have changed my actions, as a teen, that would have led to pregnancy. I am in the grade 10, experienced many things, and now, thanks to you, want to change a lot of the experiences I am still doing. Now I figured this is *my* New Year's resolution to myself.

Thank you very much

GRADE 10 STUDENT AT TUPPER LAKE HIGH SCHOOL.

LETTER FROM MARANDA WOHRLE

NOVEMBER 30, 1994.

DEAR MRS. MOLLY KELLY: I enjoyed your talk with us very much. It's nice to see for once someone isn't putting us in categories. I've planned my future in my head and one of those is to save my sexual relationship until I am married. People say once you are asked to your decision will change. But when and if that time ever comes I'll think of you. Thank you very very much.

Thanks,

MARANDA WOHRLE.

LETTER FROM BRIGID HAYES

JANUARY 8, 1995.

DEAR MRS. KELLY: I want to take this opportunity to thank you for coming to speak at our school. I really enjoyed your message, and I was impressed by your overwhelming care for teenagers. With all the peer pressure and day to day situations that come up in my life, I often lose sight of the values I have been taught all my life. You really caused me to take a step back to recognize my thoughts and feelings. Every day we are faced with the issues of sex, drugs, and diseases. Your program was a breath of fresh air. You gave us another alternative, a more positive choice. Chastity is such a special thing. Unfortunately, it is a very rare thing in today's society. I admire you for having the courage to stand up for what you believe

in. Thanks again for coming to the North Country to present your program. You have made a special mark on my life that will affect me forever.

Sincerely,

BRIGID HAYES.

**STATEMENT OF MARY LOUISE SCHAEFER, EXECUTIVE DIRECTOR,
FAMILY PLANNING COUNCILS OF PENNSYLVANIA**

Senator SPECTER. We will now turn to Ms. Mary Louise Schaefer. She has worked for Maternal and Family Health Services in Wilkes-Barre, PA, for over 22 years. She is now the executive director and CEO of the umbrella agency that oversees several health and social service programs over the 16-county region.

Welcome, Ms. Schaefer. Thank you for joining us and the floor is yours.

Ms. SCHAEFER. Thank you for asking. I too agree that there is a big need for abstinence education. Although I have been a grantee of title 10 funding for the past 25 years, I also understand I think there has been a big lack in education in the United States because people have not started out in very early ages on abstinence.

I also believe that society has done a great damage to our youth of today. When you see how important television is on shaping the future of children, I think we have seen nothing but sex glorified. Pregnancy and 18 is never really shown as detrimental to that teen in any way, shape, or form. Movies are the same way. I would be surprised if on primetime television or soap operas in the afternoon that we would see the plight of a teenaged girl having sex and then an ultimate child out of wedlock. For all of those reasons and because I have been both a grantee of title 10 funding for family planning and also a recipient of the Adolescent Family Life Program Act in 1981, we had that program for 5 years. We had both the care and the prevention components. There were a couple of areas that in 1981 were valid and I believe they are very valid today. And I would like to take the opportunity to read those.

Some assumptions were made. No. 1, the causes of teen pregnancy are multiple and complex and cannot be resolved by oversimplified single focus attempts to change the current trends. Other interventions should be required.

No. 2, parenting skills are learned. They are not instinctive and are necessary to assume success if they are to deal with adolescent sexual activity and teen pregnancy. We must not only provide prenatal care for pregnant teens, we must also try our very best to prevent future pregnancies. These assumptions were written when we applied for our very first Adolescent Family Life Act demonstration project. Although we were not successful in stopping all teen pregnancy, I very proudly say that we were very successful in stopping the increased rate in Luzerne County at the time. As a mother of three sons and the proud grandmother of seven children, the oldest of which is 13, I am convinced that refraining from teen sexual activity is vitally important, not only to the future of the child, but also to the emotional well-being of the child.

PREPARED STATEMENT

I would like to see much more cooperation and collaboration of services be given a bigger look at. I think, personally I believe that

all Federal agencies should be mandated to require abstinence education, but I also believe that there should be a closer working relationship with all of the agencies that are looking closely at the causes and results of teen pregnancy. Thank you, Senator.

Senator SPECTER. Thank you very much, Ms. Schaefer. I appreciate your testimony.

[The statement follows:]

PREPARED STATEMENT OF MARY LOUISE SCHAEFER

My name is Mary Louise Schaefer and I am the Executive Director and CEO of one of the four Family Planning Councils in Pennsylvania. Our agency, Maternal and Family Health Services, Inc., (MFHS) is an umbrella agency for several health and social service programs which covers sixteen counties in northeastern Pennsylvania. Our largest program is the Women, Infants and Children supplemental nutrition program (WIC). This program is funded by the United States Department of Agriculture and the Pennsylvania Department of Health.

Our next largest program, Family Planning, is funded by the United States Department of Health and Human Services (DHHS) through a Title X grant and the Pennsylvania Department of Welfare (Title XX Social Services Block Grant and Pennsylvania state funding) and the Pennsylvania Department of Health (Title V Block Grant funding).

Our other major programs and their service areas are:

- Healthy Women 50 Plus, a Breast and Cervical Cancer Screening Program, in fifteen counties funded by CDC through the Pennsylvania Department of Health.
- Healthy Beginnings Plus (HB+), a prenatal and delivery program in two counties for uninsured women at or below 185 percent of poverty funded by the Pennsylvania Department of Welfare.
- Farmer's Market Nutrition Program, providing Pennsylvania grown fruits and vegetables to eligible women and children who participate in the WIC Program in a sixteen county service area, is funded by the United States Department of Agriculture and the Pennsylvania Department of Health.
- Babies First Program, assigning a community health worker to high risk, low-income women/teens in Luzerne County to provide home visits and multiple social services throughout their pregnancy.

There are several smaller programs/projects within each of the major programs and there have been many other programs for which MFHS received funding in the past. This includes the five year Adolescent Family Life Demonstration Program funded by the Adolescent Family Life Act of 1981.

I am distressed to report that the Babies First Program, funded through the Pennsylvania Department of Health, will end on August 30, 1996. This program, begun in 1993, assigned a community health worker/home visitor to high risk, low-income women and teens to provide home visits and multiple social services throughout the woman's pregnancy. This program has been successful in enrolling pregnant teens into early prenatal care and in helping all women enrolled to keep their scheduled prenatal care appointments, provided them with reproductive and child birth education, linked them to other community resources such as housing and education, financial counseling, adoption services and referrals to family planning services. Parenting education and the provision of safety items for their homes were also provided.

MFHS has sought alternative funding including a proposal submitted last year to the Adolescent Family Life Program, however, all responses to date have been negative. This is unfortunate not only for MFHS, but for the clients of the Babies First Program. This program has helped our clients build self-esteem and provided them with a positive outlook for the future. More programs like this are needed for low-income women and teens, not less.

As the CEO of MFHS, I now find myself in a very unusual position. First and foremost I am a grantee of federal Title X Family Planning funding from DHHS. Secondly our agency has been a past recipient of Adolescent Family Life Demonstration Act (AFLA) funding, from October 1982 to October of 1987. Lastly, as the proud mother of three sons and seven grandchildren, I can appreciate the need to have teens refrain from sexual activity. This is the ultimate goal for the ideal world.

I believe my above credentials more than qualify me to testify in the hearings regarding Senator Specter's legislation on Senate Bill 1716, to amend the Public Health Services Act to reauthorize the AFLA Act including adoption education for

young persons and also provide abstinence education for young persons. I have mixed emotions regarding this potential legislation. I see a great need for this funding; however, I can also see where funding of various programs can lead to many problems if it is believed that the new programs will have all of the answers.

Throughout the entire Bill I read many good ideas, but I also see areas which may not be effective. I have chosen to respond to seven issues contained in the proposed legislation:

1. The necessity for cooperation/coordination of services.

Response: A major problem I have found in the past, while working as a grantee of the AFLA, and Title X funding, is that no matter how we legislate the need for "cooperation/coordination" of services, it seems as if there are too many extremists wanting to protect their own viewpoint and turf, instead of working together to try to solve the teenage pregnancy problem.

A. Regardless of our own moral beliefs, we have to deal with the fact that the ideal is that "no teen will engage in sex before marriage, or at least until reaching adulthood." Unfortunately, the reality is that there are more teens having early sexual relationships than there are teens abstaining from sex before marriage or adulthood or the teen pregnancy rate would not be on the rise. It is also very wrong for anyone to assume our government can impose one group of morals or religious beliefs on others if we are to look for cooperation on these issues.

B. In the past 25 years of my experience with family planning services and five years of AFLA, I found a distinct lack of true coordination/collaboration of services for teens. I found out that an agency which is totally committed to 100 percent abstinence for teens, with the old "Just Say Not" attitude, would never refer a teen for contraceptive services, even when they were thoroughly convinced or knew deep down that a teen's sexual activity would continue with that teen, no matter how hard they worked to counsel that teen against sexual activity. I have seen this happen! I have been told by some agencies that they could not, in all conscience, refer a teen, who had given birth to two babies, to a Title X family planning clinic site to be counseled to use contraceptives.

C. I wish we all could solve the problem of making agencies work together. I had hoped Title X agencies, with all of the rules and regulations required, would have been a conduit to helping all agencies truly concerned about the increasing teen pregnancy rate to work together to help to solve a nationwide problem, because I'm not sure any single program can make that happen. Programs must work together or they will continue to see the teen pregnancy rate increase again.

2. The need for incentives to be provided to married couples who desire to adopt children.

Response: I have been reading/hearing about incentives to make adoption a more preferable choice through tax and other incentives all through the 104th Congress, but I disagree with the need for incentives! This funding would only take money away from the services teens need.

A. On a weekly basis our Healthy Beginnings Plus prenatal and delivery program and often our family planning clinics receive inquiries from married couples who are *desperately* seeking to adopt a baby/child from our program. There has *never* been any indication from these desperate people that they would be less interested in adopting a baby if costs were too high, or if they would not receive any tax breaks and/or incentives. This major problem is "a lack of babies."

B. I have never seen a program proposed to provide incentives for a pregnant teen to give her baby up for adoption. I realize that this idea is socially unacceptable; however, I truly believe that willing adoptive parents do not need the proposed incentives nearly as much as some sort of incentive needs to be provided to the pregnant teen mom to give the baby up for adoption! Perhaps a chance to go to college or vocational training would help.

3. How America's problems are more moral than material.

Response: America's problems are probably more moral than materialistic, but, if this is truly the case, then there would never be any purpose for incentives to change behavior. I do believe the moral problems are the main concern for teen pregnancy. As a product of the '50's, I can say that at that time a teen would never want to get pregnant because when she did society would totally shun her, or she would be whisked off to an aunt in a faraway place to have her baby and then give it up for adoption. This was the reality forty years ago, it is not today's reality!

A. Today, our society welcomes the pregnant teen and often glorifies "her condition." Her peers admire the fact that she has given birth to someone who not only loves her, but is also totally dependent upon her. The pregnant teen is no longer sent off to a far away aunt to give birth, she parades her pregnancy "in pride," and

her child's birth (for a few months) as beautiful and beneficial to society. Those of us in the health and social service field know that this situation is far from true and will only cause heartache for the teen mother, in most cases, in the future, and a very bleak future if the child to the teen mother is born "out-of-wedlock."

B. Television, movies, etc., show the teens all the glamour of becoming sexually active. To my knowledge, I've never seen major television shows or movies which truly show the often terrible consequences of teen pregnancy; only how to get pregnant; when to get pregnant; and where to get pregnant!!

4. *That the percentage of teen births occurring outside of marriage has risen from 48 percent in 1980 to 72 percent in 1993.*

Response: For all of the above reasons, it is quite understandable that the percentage of teen births occurring outside of marriage has risen by 34 percent since 1980.

A. The only answer I can provide is that rather than the tolerance of society for teen pregnancy there *must* be stronger tolerance of opposite views of how to deal with teen pregnancy and much more collaboration between agencies who serve or wish to serve teens, along with the media, clergy and, last but not least, a much stronger support of families must be developed.

5. *Teaching children to say no to negative peer pressure is a starting place.*

Response: "Teaching children to say no to negative peer pressure as a starting place" is all well and good, as long as this statement does not go back to the campaign of "Just Say No." It didn't work then and for sure, it won't work now, particularly with teens who have already had at least one baby.

A. Several years ago, MFHS was asked to assist a rural county within our 15 county region, to decrease their teen pregnancy rate. At the time the pregnancy rate was over 60 percent for high school teens. The teen suicide rate was also extremely high. MFHS sought funding from DHHS through Title X year-end funding to develop a program on "self-esteem" in the school district. We sincerely believed that most problems with teens originated from a lack of self-esteem in their earlier years. We approached the problem with that attitude and initiated new curriculum in the school from K through 12 which did not preach to kids, but taught them how to attain more self-esteem in their lives. This has been a very good program and the teen pregnancy rate has steadily declined.

B. Studies have often shown that the most likely teens who get pregnant have a very low self-esteem and are not truly motivated to aspire to much more than "only parenthood." They express the fact that they will only "feel good" if they have someone to love them. These teens won't use contraception to prevent a pregnancy; they won't listen to counseling as to how important it is to resist peer pressure and learn to say "no" to it. These teens will probably get pregnant and unfortunately these teens will learn the hard way and realize, that they must either learn to "say no" to peer pressure or that they should use contraception in the future—because it is very rare for these teens to stop having sex once they've had sex. If counselors state that they have converted a teen who has had a child into a teen who no longer will have sex, I have yet to personally meet one. I have had them tell me that they sign cards because "that's what adults want to hear." It is very sad to think that the poor teen mom can often only get a date, after giving birth to a child, if she offers "sex" as a payment. This is reality! They will not change their sexual behavior after giving birth to a child even though we hope they will.

6. *Recipients of Federal funds should include information about abstinence.*

Response: All recipients of federal funds should be obligated to include information about abstinence in their programs. Title X does encourage this counseling. In Pennsylvania, Title XX funding, which is a Social Services Block Grant from the federal government, which flows through the Pennsylvania Department of Welfare, requires family planning clinics to counsel teens on their life style when they indicate they are sexually active and encourages them to review their life style and refrain from sexual activity.

A. On the other hand, is it so wrong to require other recipients of federal funds to be made to refer a teen for contraceptive counseling, whenever/or if, the teen expresses a desire to continue to engage in sexual activity? Isn't it better to always try to prevent a teen pregnancy particularly age 17 and under, than to condemn the use of a contraceptive?

B. As a mother and grandmother, I am totally against teens having sex out of wedlock. I have seen the consequences of teen pregnancy and HIV infection. As a CEO of a health and social service agency, I have learned the reality of the world of today's teenager. I have counseled teens about the perils of being forced to say yes to a sexual relationship which I could see they either did not want to have and/or were afraid to say no to the sexual relationship. I'd like to think that my counsel-

ing helped to prevent a teen from entering into a sexual relationship but I know there is much more to it than just counseling. Incentives, interventions at an earlier age, or some other force beyond my grasp is the answer.

7. Teen mothers are more likely to lack adequate prenatal care and to give birth to low-weight babies.

Response: Health care workers, social service agencies, educators, the legislators and many others need to truly look at "*collaboration and coordination*" of services and be less judgmental and dictatorial of the "teen." We must look for reasons!

A. After all, who is being punished by this "teen pregnancy epidemic?" I believe the major one being punished is the baby which is the result of that pregnancy. Like it or not, society is ultimately the cause of babies being born with low birth weight, a lack of prenatal care and often a multitude of other health problems. The vulnerable teen is also being punished and is often alienated from her family and peers. In our HB+ program, one of our hardest tasks is to find a place to live for a pregnant teen who has literally been kicked out of her parents' home.

When MFHS was the recipient of the initial AFLA funding for five years we were granted both a care and a prevention component in our Maternity Services Program. The program rested with certain assumptions regarding teen pregnancy in 1981:

1. The causes of adolescent pregnancy are multiple and complex and cannot, therefore, be resolved by oversimplified, single focus attempts to change the current trends. A successful project will require a variety of interventions which are centrally coordinated.

2. Adequate parenting skills are necessary if parents are to assume successfully their role in dealing with adolescent sexual activity and adolescent pregnancy. These skills are learned, not instinctive, and they presume adequacy in communication and an understanding of child development.

3. A comprehensive care program has a dual responsibility for the presenting pregnancy and the prevention or repeat teenage pregnancies.

It was our goal:

1. To encourage coordination, integration and linkages among providers of care, prevention and supplemental services which support the purposes of the Adolescent Family Life Demonstration Project.

2. To provide a model of maternity and pediatric services, with adequate supplementary services, including adoption counseling, designed to meet the needs of pregnant adolescents, the expectant fathers, adolescent fathers and mothers, their parents and significant others.

MFHS, through AFLA funding, accomplished most of the goals we set out to do, with the exception of stopping teen pregnancy. We did have an impact on the increased repeat teen pregnancy rate in Luzerne County and actually did decrease the incidence of repeat pregnancies. We were informed by the federal government that our program was one of the most outstanding demonstration projects in the country. They said they were very sorry, however, that they could not provide additional funding for this care and prevention program because it was only a *demonstration* project. I often wondered how many other good projects which had an impact on teen pregnancy, but fell by the wayside because of its demonstration status, would have ultimately lowered teen pregnancy rates. If we continue to fund demonstration projects, how do we assess the long term impact of its worth? Why does the AFLA continue to support only demonstration projects if one or more of those projects are actually accomplishing their desired goals?

Unfortunately, because the funding needed to deal with these issues is very limited, there is and has been a resentment of AFLA funding by Title X grantees because the original funds for this program were taken from Title X in 1981 which resulted in a reduction of \$16 million for Title X. Shortly after that, Gramm/Rudman cuts in Title X took another 20 percent of Title X funding. None of this money has ever been restored. If there was an ultimate goal which both programs could share in—"a reduction in teen pregnancy"—the wedge between the two programs was driven in between them in 1981, by taking funding from Title X to give to AFLA. Why did this happen? Both programs have the same goal. Why are the two federal programs constantly pitted against each other? This makes no sense!

To answer those who desire to blame an increase in teen pregnancy on the federal funding for Title X, rather than on society, they should wonder if the rate would have decreased if Title X clinic's funding had not been cut so severely, making more services and outreach available to prevent those pregnancies.

On the other hand, because the Adolescent Family Life Demonstration Act has been funded since 1981; it is also understandable why Title X providers are quick to respond in defense of their programs by citing the fact that in 1980 births to teens outside of marriage was only 48 percent and by 1993 rose to 72 percent.

Therefore, could this increase be blamed on the Adolescent Family Life Act coming into existence in 1981?

Until or unless, society is truly willing to look at, and propose, adequate solutions to the reasons why teens get pregnant then there is a definite need for both Title X family planning funding to provide sexually active teens with a method to prevent a teen pregnancy and funding for the Adolescent Family Life and Abstinence Project to develop ways to reach out to children to prevent the advent of teen sexual activity and to make certain those teens who fall through the cracks receive the prenatal and postpartum care required to deliver a healthy baby into our world.

I firmly believe that there is a need for both programs as long as they are adequately funded, but not to the detriment of the other and that a true collaboration and much more cooperation between the two federal programs is mandated by funding sources. Both want to stop teen pregnancy. Why can't they work together to reach that goal? Why is there such deliberate animosity between the two programs above and beyond the funding sources? Are the AFLA projects willing to work closely with Title X grantees? If not, why not? Title X grantees are certainly willing to cooperate and collaborate with programs funded by AFLA.

MFHS is an example of how Title X and AFLA can work closely together from 1982 thru 1987. We reduced the rate of repeat teen pregnancies. How many other programs can boast of the same accomplishment?

STATEMENT OF DR. DAVID J. MADEIRA

Senator SPECTER. I would like to turn now to Dr. David J. Madeira, graduate of New York Chiropractic College, a strong advocate for teaching abstinence-only curriculum in the Dallas School District. Thank you for joining us, Dr. Madeira, the floor is yours.

Dr. MADEIRA. Thank you, Senator Specter, for inviting me to come and speak today. I would like to say that I appreciate the testimony of Ms. Kelly and that I also support abstinence-based education or as she says, chastity-based or saving sex for marriage. And I do think that one of the most important things that we can look at here as we are considering Federal funding for it is what is it about children that allows them or motivates them not to have sex. Since that is our ultimate goal to see no teen sexuality so that there is no teen pregnancy, no sexually transmitted diseases, none of the emotional hurt and pain which Ms. Kelly spoke of. And I refer to Dr. Wanda Franz, who is an associate professor of child development and family studies at West Virginia University. And she says that there are four myths that form the basis of nonabstinence-based education courses.

The first myth is that adolescents function like adults and can be expected to make logical decisions. This would be for instance telling someone if you drive your car at 95 miles an hour on a crowded 35-mile-per-hour street, you may have an accident. An adult can process that information. A teenager may not be capable of processing that information and coming to logical conclusions.

The second myth that Dr. Franz points to is given a wide range of choices about sexual lifestyles, adolescents will choose one rationally. The third myth is that teenagers must inevitably engage in sexual behavior. This is the "everyone's doing it" story. The fourth myth is that adolescents can be taught the meaning of love and will engage in responsible lovemaking. These four myths form the basis of nonabstinence-based sex education that says everybody is doing it. We need to at least catch those that are falling through the abstinence crack and provide them with the education they need. Where these kids are at in Piaget's, the stages of cognitive development according to Dr. Franz is that they are overwhelmed by immediate concrete experience, the joy and pleasure of sexual

intercourse. They have a difficult time anticipating future outcome, what will the results of my actions be now? And they process information in a haphazard way. This is why teens are more likely to like roller coasters than adults are.

So our approach to teens has to be oriented toward the way they think and the way they process information. And we understand from research that the No. 1 reason teens engage in sexual activity is peer pressure. And yet based on surveys put out by the Lou Harris poll organization, almost 65 percent of all high school females are still virgins. So even though with all this bombardment, we still have abstinence being the majority position among teens in high school. And I think this paradox, this, on one hand saying that everybody is doing it and on the other hand, the research says no. In fact, more kids are not doing it than are doing it. In this area lies the key to any attempts by the Federal Government to solve this problem. And that is, let's take those kids who are saying no and let's hold them up on a pedestal. Let's say these are the kids that you need to model your life after.

PREPARED STATEMENT

This is what we as adults in our community approve of and believe in. And let's give them the abstinence message that is positive, that is exciting and that is approved of by adults. Let's not tell them you can't do it. Let's give them the best answer, the 100-percent answer, let's believe in our kids.

Senator SPECTER. Thank you very much, Dr. Madeira.
[The statement follows:]

PREPARED STATEMENT OF DR. DAVID J. MADEIRA

PROPOSITION

Teenage promiscuity has increased dramatically in the last 35 years and has brought with it many intractable problems. The public schools have not only been unsuccessful in dealing with teenage promiscuity, their "solutions" have actually exacerbated the situation. Abstinence-based sex education is an essential first step for public schools to take to begin the process of reversing the tide that threatens future generations.

HISTORY

Since the early 1970's, the "safe sex" message has been promoted with billions of dollars (over \$2 billion from 1971 to 1981, and \$622 million in 1985 alone).¹ Yet during the same period, teen pregnancy increased 48.3 percent, and teen abortions increased 133 percent. In 1990, the U.S. was considered to be the leader in industrialized countries in teen pregnancy at 99 per 1,000 girls.² In second place, with less than half our rate of teen pregnancy, is England.³

More recently, New York's Robin Hood Foundation reported that children born to mothers 17 years old and under are twice as likely to be abused or neglected, 50 percent more likely to repeat a year in school, nearly three times as likely to do jail time, and much less likely to be healthy. The cost of all this (including direct public assistance, extra medical care, foster care, and prison costs) has been estimated to be \$7 billion each year.⁴

Sexually Transmitted Diseases (STD) are also dramatically increasing in teen populations. Three million new teens will be infected annually, and 63 percent of all STD's occur in persons less than 25 years of age.⁵ New cases of Pelvic Inflammatory Disease (PID)⁶ and gonorrhea⁷ are at historic levels (over 1 million per year).

Syphilis is at a 40 year high and ½ million new cases of herpes occur annually.⁸ Four million new cases of chlamydia occur each year⁹ and 10-30 percent of 15- to 19-year-olds are infected.¹⁰ The worst STD of all is also attacking our children, with

1 out of ever 100 students entering the University of Texas health center testing HIV positive.¹¹

SCIENTIFIC LITERATURE ANALYSIS

What is it about the "safe sex" message that leads to such dismal results? Consider the following:

1. Latex condoms have microscopic holes 5 microns in diameter.¹²
2. The AIDS virus (HIV) is .1 micron in diameter.¹³
3. The FDA found that as many as 29 of 89 latex condoms tested leaked HIV sized particles.¹⁴
4. The use of a condom only decreases the infectivity of HIV by a factor of 10 when used perfectly (less when used incorrectly).¹⁵
5. Condoms fail at least 15.7 percent of the time annually in preventing pregnancy. They fail 36.3 percent of the time among young, unmarried, minority women.¹⁶
6. The failure rate for condoms due to slippage and breakage among homosexual men is 26 percent.¹⁷
7. Another study found that condoms slipped off or broke during use 7.9 percent of the time.¹⁸
8. A \$2.6 million condom study at UCLA sponsored by the federal government had to be terminated part-way through "because of concern that the AIDS infection rate among male homosexuals [was] so high that condoms may be incapable of providing protection to study participants."¹⁹
9. Nonoxynol-9, a substance used in conjunction with condoms to kill the AIDS virus, may actually increase transmission by irritating the vaginal mucosa, exposing more white blood cells to the virus.²⁰
10. The FDA considers condoms "safe" if the leakage rate is less than 5 per 1,000.²¹
11. The Allan Guttmacher Institute—the research arm of Planned Parenthood—estimates the failure rate for condom prevention of pregnancy at 14.8 percent for the first year of use.²²
12. Condoms are 69 percent effective in preventing the transmission of HIV in heterosexual couples. Dr. Susan Weller says, "When it comes to the sexual transmission of HIV, the only real prevention is not to have sex with someone who has or might have HIV."²³
13. When 800 Sexologists at an HIV conference in Washington, D.C. were asked if they would trust a condom to protect them during intercourse with a known HIV-infected person, not one raised their hand.²⁴
14. A Study of married couples in which only one partner was infected with HIV found that 17 percent of the uninfected partners using condoms for protection still caught the virus within a year and a half.²⁵

PSYCHOSOCIAL FACTORS

With these bleak statistics regarding the "saftey" and "effectiveness" of condoms, is it any wonder that we are facing a crisis with pregnancy and sexually transmitted diseases among teens? But the flaws inherent in condoms as protective devices aren't the only problem. Research on adolescent cognitive development shows that most teens are not capable of making reasoned decisions regarding sexuality.

1. Dr. Wanda Franz, associate professor of child development and family studies at West Virginia University, points to four "myths" that form the basis of non-abstinence-based sex education courses:

- Myth No. 1: Adolescents function like adults and can be expected to make logical decisions.
- Myth No. 2: Given a wide range of choices about sexual lifestyles, the adolescent will choose one rationally.
- Myth No. 3: Teenagers must inevitably engage in sexual behavior.
- Myth No. 4: Adolescents can be taught the meaning of love and will engage in responsible love-making.²⁶

2. Based on Piaget's stages of cognitive development, Dr. Franz contends that most adolescents reason as "concrete operators". This reasoning is characterized by the following:

- Overwhelmed by immediate concrete experience.
- Cannot anticipate future outcome.
- Processes [information] in a haphazard way.²⁷

"In almost every study [of condom effectiveness], nearly half of the participants dropped out or were disqualified before the end of the study because they did not faithfully use condoms."²⁸ If motivated adults in a scientific study are not likely to

use a condom every time, it is unreasonable to expect teens to follow through on condom use.

Fifty-eight percent of girls under 18 do not use contraception during their first intercourse,²⁹ and most do not start using any kind of contraception for a full year after their first intercourse.³⁰ The number one reason teens engage in sexual activity is peer pressure,³¹ and yet almost 65 percent of all high school females are virgins.³² So while the "safe sex" message windingly tells our children that "everybody is doing it", 2 out of 3 girls are not.

"REAL WORLD" SOLUTIONS

This paradox contains the key to our fight against the problem of teen promiscuity. The myth is "Everybody is doing it." The truth is that kids who have sex are in the minority and don't know it. What if we could turn the peer pressure around by affirming the abstinent? Would it work in the "real world"? Consider the results of the following abstinence programs currently being used in public schools.

1. The AANCHOR program was tested in thirteen school districts in Utah, California, New Mexico, and Arizona. When compared to the standard, condom-based program, the students in the AANCHOR program reported:

- higher family strengths (loyalty, emotional support, and cohesion),
- more frequent discussions with parents about sexual values and beliefs, and
- more abstinent attitudes regarding premarital sexual involvement.³³

2. Me, My World, My Future has been used in over 2,500 schools. Testing showed that students reported being less likely to engage in intercourse before marriage and more aware of the negative consequences of teenage sexual behavior.³⁴

3. The year before Sexuality, Commitment, and Family came to the city of San Marcos in 1984, 178 of the junior high and high school girls had become pregnant (1 in 5). After two years with the program, only 20 girls became pregnant.³⁵ As of 1990, over 2,500 school districts had purchased the program.

4. Follow-up data for Sex Respect in 1990, used in over 1,000 school districts nationwide, showed that among the 3,500 students studied in the program, only 5 percent had become pregnant, whereas the girls not in the program had a 9 percent pregnancy rate during the same period.³⁶

5. The Washington, D.C.-based Best Friends program, which teaches sixth-through-ninth-grade girls how and why to say no to drugs, alcohol, violence and sexual intercourse, was evaluated recently by David Rowberry, Ph.D., of the University of Colorado. Only 10 percent of the participants had sex, compared to 72 percent of the girls not in the program.³⁷

These true-life examples make a compelling argument for the use of abstinence-based sex education programs in our public schools. We have used this approach successfully in the past to combat drugs and alcohol through Nancy Reagan's "Just say no!" campaign. And most public schools today have programs that strongly discourage alcohol and drug use through peer pressure motivated by an adult community that shows unified, public disapproval of these activities. Why not apply the same principles to this life-destroyer and finally start reversing the tide of teen promiscuity? After all, we do not teach our children how to evaluate the purity of cocaine or show them the proper way to snort it "just-in-case" they can't resist the urge.

POLICY RECOMMENDATIONS

Having established that abstinence-based sex education is the only workable and realistic solution, we should explore what policy changes could be made to bring about the desired results.

Since Washington was the driving force behind much of the "safe-sex" approach by virtue of its "money-in-exchange-for-compliance" Department of Education policies, it is only fitting that the return to sound sex education begin in the same way. The U.S. Department of Education should mandate that abstinence-based sex education be a prerequisite to receiving certain education funds. States should follow the same policy with education funds. Michigan does just that and their law could be used as a starting point for all interested policy makers.³⁸

A WORD ON ROOT CAUSES

This would be a beginning, but it would not be the end. As President Clinton said in his State of the Union Address in 1996, "The era of big government is over." No problem better illustrates the truth of this axiom than teen promiscuity.

The root of this problem lies not with the government at any level. It is not the U.S. Congress, the U.S. Department of Education, the State Department of Education, or even the local school board that is primarily responsible for the values

our children learn. These servants should assist families by standing with them in their efforts, but they are not the source of the problem.

The real source of the problem is us. We have rejected in our own lives the very thing we need most, deeply rooted values based on a transcendent law. James Madison, chief Architect of the Constitution, said, "We have staked the whole future of American civilization not upon the power of the government, far from it; we have staked the future of all our political institutions . . . upon the capacity of each and all of us to govern ourselves according to the Ten Commandments."³⁹

More recently, Ted Koppel said in a 1987 speech at Duke University, "We have actually convinced ourselves that slogans will save us. 'Shoot up if you must, but use a clean needle.' 'Enjoy sex whenever and with whomever you wish, but wear a condom.' No! That answer is no. Not because it isn't cool or smart or because you might end up in jail or dying in an AIDS ward, but no because it's wrong, because we have spent 5,000 years as a race of rational human beings, trying to drag ourselves out of the primeval slime by searching for truth and moral absolutes. In its purest form, truth is not a polite tap on the shoulder. It is a howling reproach. What Moses brought down from Mount Sinai were not the Ten Suggestions."⁴⁰

The time has come for us as adults to provide the guidance that our young people need. Their success, happiness, and even their very lives depend on it. Until we as parents are willing to state unequivocally to our own children that abstinence until marriage is the only acceptable approach to human sexuality, I fear that we will not stop the scourge that promiscuity and its attendants have visited upon us. I only pray to God that we are not too late.

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STATEMENT OF REV. FRANK BISSOL, PASTOR OF ELKDALE BAPTIST CHURCH AND CHRISTIAN ACADEMY, WEST CLIFFORD, PA

Senator SPECTER. We now turn to Rev. Frank Bissol, Pastor of the Elkdale Baptist Church of West Clifford, PA, and the Elkdale Christian Academy. Reverend Bissol received his master of divinity in 1982 from Baptist Bible School of Theology in Clark Summit, PA. Glad to have you with us, Reverend Bissol. The floor is yours.

Reverend BISSOL. Thank you very much. The problem of teenage pregnancy is not a new problem, the solution, therefore, should not be a new problem or a new solution either. Teenage pregnancy is as old as the daughters of Lot who were taught in the schools of Sodom and Gomorrah. Since it is an age-old problem, an age-old solution is readily available. There is no foolproof solution because we live in a world of imperfect people. All we hope to do is to present the best solution. For thousands of years, the only valid solution has been abstinence. History will bear out that when abstinence was taught by the church, the state, and the schools it worked well. Today through discoveries of new forms of birth control, we feel it is no longer needful to encourage our young people to restrain themselves sexually. They say they can now have safe sex if only they take the right precautions.

So human reasoning would dictate that new times allow for new standards of morality. This grand experiment I believe is failing. And we marvel and applaud the discipline of the youth that were involved in the Olympics and the media magnified them and extolled them as being physical role models for young people of the world.

I believe if the media would extol moral purity and virginity, marriage fidelity with the same zeal maybe something could be done to curb teenage pregnancy. The problem of teenage pregnancy is a simple problem to solve. It is not that we do not have the answer. The problem is we are rejecting the age-old answer, teaching young people.

Principles of abstinence is a solution of the past and can be today. This rejection comes only because of our own denial. I believe we are in denial that our grand experiment to redefine morality has failed and is failing. Our denial, I believe, can lead to the bankruptcy of this Nation. If we don't turn the ship around, the

ship is a large ship so it takes time to turn. What we should do is take from history the best examples of governments, analyze their successes and failures, come up with a common denominator of success and initiate it into our own system. If we do that, we will discover there is one constitution or legislative law that has withstood the testing of time.

You might think that the constitution I have in mind is the great Constitution of the United States. I will shock you to tell you that there is a greater constitution than that, of the United States. The constitution that I am talking about is none other than the 10 legislative commands that were given to ancient Israel. Many think it's religious dogma, but if you really study it out, you will find that the Ten Commandments were really the covenant of the Old Testament of the ancient country of Israel. We shy away from any legislation that gives any resemblance to it. I almost feel like whenever we legislate anything that sounds like the Ten Commandments, our Nation goes into spasms. I feel almost as if God is politically incorrect.

The Ten Commandments was that form of legislative genius unsurpassed by anything ever written. I believe the bill to incorporate legislation to teach abstinence as an alternate form of birth control for teens is in harmony with this grand old covenant and is a step in the right direction to preserve our Nation for future generations.

A few years back, I received a phone call from a doctor who told me that there was a young teenaged girl who loved my family, my wife, and myself very much and she had just tried to commit suicide. She had gone through two teenage pregnancies. Both were miscarriages. Literally, the doctor said her only hope is you. We took her in. Literally adopted her, so to speak. She was 18 so we did not have to go through procedures of adoption. And in so doing, today she is doing well. She is married. She went to college. We helped her get her GED and just the past weekend, I talked to two other teens, 14, 16, the girl is 14, the boy is 16. They too were kicked out of their homes because of a teenage pregnancy. This weekend I talked to a 15-year-old girl, she is having family problems.

PREPARED STATEMENT

All across our Nation we have testimony after testimony of these problems. I believe that if we will just seek to restore the ancient solution to teenage pregnancies, I believe that we may get good results. I cannot think of a good reason to avoid or to reject this healthy endeavor of promoting sexual abstinence for teens before marriage.

Senator SPECTER. Thank you very much, Reverend Bissol.

[The statement follows:]

PREPARED STATEMENT OF PASTOR FRANK BISSOL

The problem of teenage pregnancy is not a new problem. The solution is simple: our only problem is that we are *rejecting* the simplest solution and are *in denial* as to why it will work.

Teenage pregnancy is as old as the daughters of Lot who were educated in the schools of Sodom and Gomorrah. Since it is an age old problem an age old solution is readily available. There is no foolproof solution because we live in a world of imperfect people. All we can hope to do is present the best solution. For thousands

of years the only valid solution was abstinence until marriage. This solution was promoted and taught and accepted universally by all people of all faiths except the most barbaric and heathen. History has borne the fact that this solution has worked best and better than our current methods. There was a time in this country that universally the Church, the State and our Educational systems promoted this form of birth control for teens. Because we rejected this basic and simple solution, we are reaping devastating results.

Today with the discoveries of new forms of birth control we feel that it is no longer needful to encourage our young people to restrain themselves sexually we say "they can now have safe sex if only they take the right precautions." So human reasoning would dictate that new times allow for new standards of morality. This grand experiment is failing.

We marvel and applaud the discipline of young people who have gone to the Olympics. Many of us find it hard to understand how these young people could exhibit such physical grace and discipline. The media magnifies them and extols them as physical role models for the young people of the world. If the media would extol moral purity and virginity and marriage fidelity with this same zeal maybe something could be done to curb teenage pregnancy. Giving condoms to young people in our schools is like saying, "we know you can't win the Olympic race for sexual abstinence till marriage, so here take a condom and give up before you even start."

The problem of teenage pregnancy is a simple problem to solve. It is not that we don't have the answer to it. Our problem is, *we are rejecting the age old answer.* Teaching young people principles of abstinence was the solution in the past and can be today. Statistics have shown that this form of birth control will produce stronger marriages in the future, and if accepted and implemented would save the taxpayer millions if not billions of dollars in future generations. Also it should not be expensive to implement. It is not that we don't have the answers; *the problem is, we are rejecting the most basic and cost effective answer.*

This rejection comes only because of our own denial. We are in denial that our grand experiment to redefine morality has failed and is failing. Our denial will bankrupt us if we don't turn things around. Sometimes it seems to me that our nation goes into spasms whenever anything at all is legislated that in any way resembles something that harmonizes with religion or God. Has God become politically incorrect! Have we become one nation without God.

What we should do is take from history the best examples of governments, analyze their successes and failures, come up with the common denominator of success and initiate it into our own system. Now, if we will do what I suggest what we will discover is that in all of history there is one legislative constitution unlike any other the world has ever known or will ever know.

You might think that the constitution I have in mind is the great constitution of the United States. I am going to shock you and tell you there is a greater. The constitution or covenant that has endured longer than our constitution is that covenant that was given to the nation Israel in the form of Ten Commandments. People who live in historical ignorance take the Ten Commandments as religious dogma only and therefore, we have felt it necessary in order to maintain a separation of Church and State, to shy away from any legislation that gives any resemblance to it. Yet, the giving of the ten commandments was a form of legislative genius unsurpassed by anything else ever written. The truth is that the nation Israel still stands as a testimony of its power to preserve a people and society. Even when that ancient nation tried to abandon it confusion and turmoil set in. What our current sex education system does is promote the breaking of the 7th commandment, "Thou shalt not commit adultery." Fornication or sexual promiscuity, before and outside of marriage is a breaking of this age old law which was given to promote strong families, and monogamous marriages and a healthy nation. The ten commandments were given not just as religious law but were given as a condensing of all of ancient Israel's judicial law. Any nation that will copy it will reap great benefits, both financially, and morally. There was a time that we believed that and reaped those benefits. These 10 basic legislative laws transcend religious sects and denominations. Now that we have rejected these as foundational, our social and moral problems have become too complicated to bear.

The bill to incorporate legislation to teach abstinence as an alternative form of birth control for teens is in harmony with this grand age old covenant and is a step in the right direction to preserve our nation for future generations.

A few years back I received a phone call from a doctor who was treating a young girl who had just attempted suicide. She had been a pregnant teen twice and miscarried both times. The doctor said, "This girl loves you and your wife very much and I think you may be her only hope." Can you take her in for a while? Because of the doctor's pressing upon us, we did that. We literally adopted her in as part

of our family. We encouraged this girl to get her G.E.D., we helped her get a job and then she went on to college and there met a fine young man to marry. Today she is happily married and doing well. Helping this young girl to get off of welfare didn't cost the government anything. It was not a school that was used to help her, it wasn't the government, it was a family. The real problem we are facing in our nation is not an educational problem or a budget problem, it is a basic moral and family problem.

Just this past weekend I talked to a young teen who is pregnant, has no job and is in danger of alienating her parents because of her promiscuous life style. When this young girl was 15 and living with a boyfriend, her parents called the police and school asking them for help. The mom was told that there was nothing they could do and the sexual rights of this child were upheld above the wishes of the parents. Last week I talked with a young couple, the girl was 14 and pregnant and the boy was 16. Both also alienated their parents because of their pregnancy problem and neither are ready to rear a family. All of these young people received education in their schools on birth control, but none on abstinence. Who will foot the bill for their mistakes? The tax payer will ultimately.

God made families to produce and rear children, not institutions, or villages, or even churches. One grand purpose of the Church, the State or even a School should be to strengthen the family. Any nation that feeds or strengthens leaders of government, or any sect or church, or school that would weaken the family is committing a form of societal suicide. I fear that we have a greater problem than physical aids in this country. We have a deficiency of morality that is literally rejecting principles that make for a healthier society. The negative peer pressure of the day is encouraging sexual promiscuity and not moral purity. If we really want to turn this country around we need to stop rejecting that ancient covenant that sustained people and nations longer than our great nation has been in existence. Teaching abstinence and moral purity to teenagers is one step towards promoting a healthier nation. I cannot think of a good reason to reject this healthy endeavor and legislation.

STATEMENT OF HENRY C. HEWITT, PRINCIPAL OF SCRANTON PREP HIGH SCHOOL, SCRANTON, PA

Senator SPECTER. We now turn to Mr. Henry C. Hewitt, principal of Scranton Prep High School. Principal Hewitt received his bachelor of arts from the University of Scranton. Thank you for joining us, Mr. Hewitt, and the floor is yours.

Mr. HEWITT. Thank you for the opportunity to speak. I would like to address you today as a veteran of a war. I have been involved for most of my professional career, the better part of 25 years, trying to help students make good decisions.

I speak as one who has been in the trenches, the foxholes, and the front lines of this battle. There are many days, today, that I leave the classroom wondering if it is worth continuing the struggle. Like many tired and worn warriors, I sometimes question if the battle can be won or if it is even worth fighting any longer. I can attest to the fact that in the past 15 years the conflict has grown harder. I often wonder if that is a function of age due to the fact that every year I get further from my students. However, I firmly believe that the times have grown more difficult.

The pressures on adolescents today are stronger than ever. I do not want to take valuable time enumerating those factors that have fortified and entrenched the opposite side and you are probably very much aware of what they are. The reason I accepted the invitation to testify today is because I am always looking for allies. As with any embattlement, funds to wage the war are extremely important. What better ally to help fund this campaign than the U.S. Government. I strongly feel that this battle is as much worth paying for and as noble a cause as any other that our country is involved in at this time. I am convinced that if the legislature began making some responsible decisions in terms of the issues of absti-

nence, we might stand a chance. I have many strongly held beliefs about how moral education and responsible decisionmaking should be taught.

Children need to be encouraged in the process of decisionmaking. Merely handing out information is not enough. There is not a student that I teach that does not know the route of transmission of the AIDS virus, the dangers of drinking and driving, and the use of other illegal drugs. But that does not mean they say no to them. Information does not make the decision for young persons, nor is it often consulted, unfortunately. Whenever I am involved in a pregnancy intervention, one of the first words I hear is, I do not know how it happened.

People often chuckle when they hear that, but I am convinced the young person does not know. Oh, they know all about the reproductive system and how they work, but they are saying I do not know how I allowed it to happen. We do need initiatives, research, and a driving force to determine the best way to help young people learn the values behind abstinence. I hope this legislation will be a beacon of hope for those who are trying to find a way to help young people lead healthy, happy, and productive lives. If I may be permitted one last reflection, is there one American who did not feel a tremendous sense of pride last Tuesday evening when our young women gymnasts won the gold medal? Knowing the effort and dedication that went into reaching that dream, is there anyone who did not feel a chill when the national anthem was played. And reflect for just a minute what it took for those young women to reach their goal?

PREPARED STATEMENT

It seems to me that the backing of the people of the United States in funding that effort was critical. How nice it would be if our young people felt as supported, as proud, as honored as those gymnasts and their efforts to lead a healthy life. If we acclaimed abstinence a value as much as we do gymnastics, maybe the battle will be more easily won. This legislation could be an important step in having the same feelings toward the moral fiber of our youth today.

Thank you for proposing a legislation and offering the opportunity to testify.

Senator SPECTER. Thank you very much, Principal Hewitt.
[The statement follows:]

PREPARED STATEMENT OF HENRY C. HEWITT

I would like to address you today as a veteran of a war. I have been involved for most of my professional career, the better part of twenty-five years, trying to help students make good decisions. I speak as one who has been in the trenches, the fox-holes and the front lines of this battle. There are many days that I leave the classroom wondering if it is worth continuing the struggle. Like many tired and worn warriors, I sometimes question if the battle can be won, or if it's even worth fighting any longer.

I can attest to the fact that in the past fifteen years the conflict has grown harder. I often wonder if that is a function of age, due to the fact that every year I get further away from the students I teach. However, I firmly believe that the times have grown more difficult. The pressures on adolescents today is stronger than ever. I don't want to take valuable time enumerating those factors that have fortified and entrenched the opposite side, as you are probably very much aware of what they are.

The reason why I accepted the invitation to testify today is because I am always looking for allies. As with any embattlement, funds to wage the war are extremely important. What better ally to help fund this campaign than the United States Government. I strongly feel that this battle is as much worth paying for, and as noble a cause, as any other that our country is involved in today. I am convinced that if the legislature began making some responsible decisions in terms of the issues of abstinence we might stand a chance.

I have many, strongly held beliefs about how moral education and responsible decisionmaking should be taught. Children need to be encouraged in a process of decisionmaking. Merely handing out information is not enough. There is not a student that I teach that doesn't know the route of transmission of the AIDS virus, the dangers of drinking and driving, and the use of other illegal drugs. But that doesn't mean they say "no" to them. Information does not make the decision for the young person, nor is it often consulted.

Whenever I was involved in a pregnancy intervention one of the first words I hear is, "I don't know how it happened?" People often chuckle when they hear that, but I am convinced the young person doesn't know. Oh, they know all about the reproductive systems and how they work, but they are saying, "I don't know how I allowed it to happen." We do need initiatives, research and a driving force to determine the best way to help young people learn the value behind abstinence. I hope this legislation will be a beacon of hope for those who are trying to find a way to help young people live healthy, happy, and productive lives.

If I may be permitted one last reflection. Is there one American who didn't feel a tremendous sense of pride last Tuesday evening when our young women gymnasts won the gold medal. Knowing the effort and dedication that went into reaching that dream, is there anyone who didn't feel a chill when the National Anthem was played? Think for just a minute what it took for those young women to reach their goal. It seems to me that the backing of the people of the United States in funding that effort was critical. How nice it would be if our young people felt as supported, as proud, as honored as those gymnasts in their efforts to lead a healthy life. If we acclaimed abstinence a value, as much as we do gymnastics, maybe the battle would be more easily won. This legislation could be an important step in having the same feelings toward the moral fiber of our youth today.

Thank you for proposing this legislation and offering the opportunity to testify.

STATEMENT OF JOHN PLUCENIK OF WILKES-BARRE, PA

Senator SPECTER. We turn now to Mr. John Plucenik, certified education and prevention specialist having taught abstinence-based education to at-risk youth in the Wilkes-Barre Housing Authority. He received his masters in health administration in 1995 from Kings College. Welcome, Mr. Plucenik, and we look forward to your testimony.

Mr. PLUCENIK. Thank you, Senator. I am going to approach this from a little different angle. I have been hearing a lot of cheerleading for abstinence education, and I am cheerleading right along with them. We have to first define what abstinence education is. It is not as easy as we might think. Is advising 13-year-olds that it is OK to stick their tongues in each other's bellybuttons, abstinence education, or mutual masturbation, or pouring whipped cream over each other and licking it off, or giving each other hot oil massages? The answer really is not as clear as you might think. In fact, it depends on who you ask. I asked a certain director of a major health care facility in New York City who performed AIDS education in the local area in the past year. She has a Ph.D., well spoken, well versed. And she told me without hesitating, yes, these are all forms of abstinence-based education.

I am not a Ph.D., but I do have a lot of experience with working with kids. I have not been in the trenches in the war. But working in housing authorities in the past 7 years, I felt like I have been in the trenches. So I have seen at-risk kids and I know what is going on out there. I have counseled enough AIDS patients as a

drug and alcohol counselor to know that people are dying because this issue is being ignored. I can no longer stay silent. I have five kids at home, including two teenagers, so I have a vested personal interest as well as professional interest in this. We are here because it is about our children. We care about their futures, we care about their lives. I think we can almost all agree that prevention/education works. It's what type of prevention education that is causing a lot of the problems. And these choices can be dangerous and even deadly when you are given the wrong advice. When AIDS education was mandated in our schools, sex education came right along with it. But there is not a clear menu given to administrators of what types of different sex education should get the green light or the red light.

I believe that sex education emphasis should be placed on the family and that the parents are the primary sources of education. Parents delegate, but do not advocate education, to the teachers and the schools with regard to sex education. I think all programs should emphasize sexual abstinence and young people should be impressed of their responsibility to restrain themselves from premarital sex. I was all in favor of abstinence-based education until it was hijacked by some social scientists to meet their own agenda. Here is how it goes.

You spend the first 30 seconds of a program in school talking about abstinence, saying it is the only 100-percent guarantee. It works. That is what you should do. Then you spend the next 59 minutes talking about the hot oil massages, passing out condoms, and so forth. Now, to me, I do not believe that is abstinence-based education, but that is what is being pawned off. So we have to really be careful before we throw \$75 million, who is going to be receiving these grants.

There are many fine abstinence-based or abstinence-centered education materials. They are called—abstinence-centered is the term because abstinence has to be the major dominant theme throughout the educational lesson. The Red Cross provides an excellent AIDS education course using abstinence-centered materials. They do not distribute condoms. Now, abstinence-centered, that term, that is a year old. That has become passe. Now postponement education is the new word. There is an excellent postponement curriculum provided by the Boy and Girl Scouts of America called Smart Moves. I use the program. I feel it is effective. Some of the points of the Smart Moves Program are that young people are not very good contraceptors. Even though they might know about contraception, most likely they will not use them anyway. It also emphasizes that young people are being externally and internally pressured to have sex. But they are not equipped with the right tools, the resistant tools they need to turn it down. I think these are the skills that need to be honed in and also developing the person's self-esteem and self-attitude about making the right choice.

Another excellent postponement or abstinence-centered program is called Save Sex. I do not believe there is such a thing as safe sex. If you talk to AIDS patients, they will tell you the same thing. This is provided by the Family Research Counsel. I brought some posters that you are welcomed to have and take a look at and it is an excellent program.

PREPARED STATEMENT

Again, I want to emphasize and reiterate, we have to make this a positive approach. I apologize for going over the time limit. It will take me 5 seconds. We do not have to continue to say no to sex, say no messages. We have to create this into a positive message to where they are saying yes to fidelity, they are saying yes to the joy of waiting for marriage and the pleasures that go with it. Thank you, Senator, for your time.

Senator SPECTER. Thank you very much, Mr. Plucenik.
[The statement follows:]

PREPARED STATEMENT OF JOHN PLUCENIK

Is advising 13-year-olds to stick their tongues in each other's bellybutton a form of abstinence-based education?

Is telling freshmen boys going through puberty they have the green light to give their girlfriends full body, hot oil massages abstinence-based education?

Is telling a bunch of giggling 8th graders that it's OK to cover each other's bodies with whipped cream and lick it off really abstinence-based education?

How about mutual masturbation? Is that abstinence-based education?

The answer is not as clear as you may think. In fact, it really depends on who you ask.

If you ask a certain director of a major adolescent health center in New York City, who happens to hold a PhD (in what I don't know), she'll tell you "Yes, they are all forms of abstinence-based education!" How do I know she would say this? I asked her.

My name is John Plucenik and I don't have a PhD. But I do have some experience in working with young people as a teacher, counselor and youth leader. My credentials are attached to the testimony. I thank Senator Specter and his staff for including me in the program and for conducting these vital public discussions.

In my professional capacity, I've counseled enough AIDS patients, been to too many funerals and talked with enough teenage mothers in my lifetime to stay silent about this issue. As a parent with five children at home, including two teenagers, I can tell you I have a vested personal interest in the discussion today and what may happen on the legislative front in the future.

It's about our children. That's why we're here. We're talking about our children—our future. There's no better investment this country can make than in our youth. Whether you're a Republican or a Democrat, liberal or conservative, I believe this is something we can all agree on and we can almost all agree that prevention/education works. It's the differences in methodology of prevention/education programs that create problems. These differences can be dangerous and even deadly.

When AIDS education was mandated in Pennsylvania schools in the early 90's, sex education came right along with it. Sex education is desirable for young people today and I believe should exist. Age and maturity of students should be carefully considered in the selection of materials and curriculum. Effective, well-balanced and sensitive programs are available.

Emphasis should be placed on the family. I believe that parents have the primary, inalienable right to educate their own children according to their own religious, moral and cultural values; they delegate, but do not abdicate, that right to schools and teachers. Parents know best what their children must learn and should have dynamic involvement and final responsibility in deciding all aspects of the educational program in their local public schools. The program selected should support sexual abstinence before marriage and fidelity in marriage. Young people should be impressed with their responsibility to restrain themselves from pre-marital sex.

I was all in favor of abstinence-based education until that term was hijacked by liberal social scientists who twisted it to meet their own agenda. It goes a little like this: Spend the first 30 seconds telling students that the only 100 percent guarantee from preventing pregnancy, STD's, AIDS, etc. is abstinence. Then you spend the other 59 and a half minutes demonstrating condoms and talking about whipped cream and hot-oil massages and telling everyone this is the real world. They'll call that abstinence-based education. My early illustrations are examples of a program I witnessed in the past year. Despite what many PHD's have to say, I don't believe that is abstinence-based education.

We now have the evolution of "abstinence-centered" education, which I believe means that abstinence must be the dominant, central theme of the sex education

lesson. It was what "abstinence-based" education was intended to be before it was hijacked.

There are many fine abstinence-centered educational materials. Some I am aware of is the Red Cross AIDS education course, which is abstinence-centered. This program was first introduced to me by an AIDS patient who went through the training and uses the model when he speaks to young people at local schools.

But even abstinence-centered education is now becoming passe. The term that is now growing in appeal is "postponement." A good example I utilize in my teaching is based on a curriculum called SMART Moves, a national prevention program put together by the Boys and Girls Clubs of America. Rather than confusing youth with a double message that says: "We want you to wait, but if you do have sex use a condom," the program focuses on a single message: Young people are poor contraceptors. The safest, healthiest and 100 percent effective method of preventing pregnancy in this age group is to postpone sexual involvement.

The SMART Moves curriculum cites these reasons for helping young people to postpone sexual involvement:

- Many young people are not ready to understand the full implications of their actions, or to handle all of the consequences.
- Young people are poor contraceptors. Although they may know about contraceptive methods, they often don't use them.
- Most young people are internally or externally pressured to engage in behavior they don't really want to engage in, but lack the skills needed to resist these pressures.
- Young people face serious health risks from STD's such as AIDS.
- The development of young people's self-esteem as well as their peer and family relationships can suffer.

The postponement approach can provide young teens with appropriate limits, social options and skills to avoid sexual activity. Adults must send clear consistent messages to say no to sexual behavior and to act responsibly until they are able to make more informed decisions about sexual involvement.

Another good abstinence-center or postponement program is the Save Sex program available through the Family Research Council. I brought some copies of posters to show the people who put this together are not squares or prudes who are not in touch with our youth. They use music, contemporary themes, visual images and sound advice that is in no way considered corny. Their ads are on MTV, not on a religious channel.

For Biblically-based education more appropriate for church youth groups—I recommend "Sex: Worth Waiting For" published by Group Real Life Bible Curriculum.

As a drug and alcohol prevention/education specialist, I am quite aware that many teenagers, despite all the great education programs and Just Say No media messages, still drink and use drugs. But it would be ridiculous to say to our youth it's OK to drink or do drugs, but do it responsibly. That's a mixed message and an ineffective message. The same should apply to sex education.

Even if we get some agreement on a program that is most effective, it doesn't mean the battle is over. Abstinence programs are not new. According to my research, one of the earliest so-called "teen chastity" programs was created as a result of the Adolescent Family Life Act in 1981. A program called "Teen Choice" aimed at convincing young people to abstain from pre-marital sex was challenged by the A.C.L.U. The program, according to its Director, Jo Ann Gasper, "teaches prudence, temperance, fortitude and justice—in other words—making good decisions. The ACLU maintains that because we're encouraging kids to abstain from sex outside of marriage that we're promoting religiosity—and that's plain crazy. We are teaching good health."

We must stand up to these challenges. And we must use longitudinal studies, as well as good plain common sense, to support these programs.

We not only need to teach good health, we need to set a firm foundation. We need to set a clear standard of behavior for our youth. It doesn't have to be all negative and filled with Just Say No messages. We need to tell young people that sex with someone they love and have made a lifetime commitment to is worth waiting for. That is the message we have to emphasize. A positive message. To me, that is what "abstinence-centered" is all about. That is the message we must get through in discussing postponement. Not only what to say no to, but what to say yes to.

John Plucenik is Director of The ARK Learning Center, 81 Division St., Kingston, Pa. 18704 (717) 283-8233. E-mail—plucenik@epix.net. Fax is (717) 283-0202. Mr. Plucenik also directs youth prevention/education programs for the Wilkes-Barre Housing Authority and provides prevention/education services to youth in the Lucerne Housing Authority as well. He served as a prevention/education specialist in the Hanover Area School District for three years, and has also taught for the Nan-

ticoke Area School District, West-Side Vocational Technical School and Lackawanna Trail School District. He resides in Kingston with his wife Petra and five children: Danny, Drena, Joshua, Rachael, and John.

GENERAL QUESTIONS

Senator SPECTER. I begin the discussion with Ms. Kelly. On your interesting expression on dropping the bomb, offering condoms at the end, and really pick up on what Mr. Plucenik talks about with 1 minute of abstinence instruction and 59 minutes on the, as he puts it, the oil rubs and the condoms.

Ms. Kelly, to what extent, if at all, are condoms mentioned? Are they mentioned as to the problems, their lack of safety? Are they omitted from any reference? How would you handle that issue?

Ms. KELLY. In an abstinence program that I would want seen taught, again, I would want to give them the how to say no, how far do you go, answer the questions they are asking. As far as condoms come, I would say condoms are out there. They are being offered to you and it is a given that they do not work, that they break. I cannot offer you anything less than the best. If you are going to do it anyway, that would be your choice, but in no way would I offer you condoms because in no way does it have anything to do with abstinence.

I mention it in my talks, but I torpedo it. I say there is no such thing as safe sex.

Senator SPECTER. So there would be no discussion as to condoms as an alternative?

Ms. KELLY. No; not in an abstinence——

Senator SPECTER. The entire direction would be on abstinence, and to the extent that condoms would be mentioned, they would be mentioned for the problems not for the——

Ms. KELLY. Exactly. Otherwise, it is a mixed message, yes, sir.

Senator SPECTER. Would you agree with that, Mr. Plucenik? Is that how you would handle it?

Mr. PLUCENIK. Excellent answer. That is how I would handle it. I would tell them I cannot in right conscious advise condoms to a student who might use a condom, it might break, they catch AIDS. Now, am I responsible for giving them advice that could lead to their death? I cannot. I can only use the 100-percent method, that I would recommend, which is abstinence. Which I know is fully safe. We are talking about a health issue. This is not really a moral issue. It is a sound health decision.

Senator SPECTER. Ms. Schaefer, you get funding both through title 10 and the Adolescent Family Life Act that is actually title 20. Can you tell us how you make the difference in allocations? We would be interested to know the amount in funding and how you approach that.

Ms. SCHAEFER. At the present time, Senator, we do not receive the AFL demonstration project funding, that is a 5-year demonstration project and as you are aware demonstration projects cannot be re-funded again, even though we were told that we were a model program.

We have applied for funding over the years for a different type of program, but we have not received that.

Senator SPECTER. What 5 years did you have the——

Ms. SCHAEFER. From the very first, when we were funded in April 1982 until 1987, 5 years later.

Senator SPECTER. 1982 to 1987?

Ms. SCHAEFER. Yes. Yes.

Senator SPECTER. And what sort of use did you make of that funding?

Ms. SCHAEFER. Basically, we had both the care and the prevention components. The care was naturally prenatal care, and one of the issues that has not been mentioned here today that I would like to mention is that in reading the entire bill, one of the areas that you address is the need for early prenatal care, particularly in the teen age. And one of the things that we were granted the funding for was to try to do a lot of outreach to make sure that we contacted teens who were pregnant to get them into the prenatal program as early as possible. And then to actually follow that teenager around to make sure that they left with all the resources, after they were pregnant, that were needed.

Basically, there are a lot of teens who lose support of their parents and their peers, although some of their peers actually idolize the fact that they are pregnant, as you well know, a lot of them lose their normal support groups. And we provided what we called home visitors who actually went out into their homes and tried to get them back in the schools, back into—more wanting self-esteem. And when I mentioned—that is another part of the program that we had, is in trying—most of the teens, through studies that I personally have read, that do end up getting pregnant are for the reasons just as Mr. Hewitt said, I do not know how it happened, and I agree with him 100 percent. That it is not the reproductive reasons that they do not know what happened. Something in their mind allowed it to happen and they need to have that shored up.

I believe self-esteem is one of the areas that really has to be worked on and our program has done that. We did education through the schools, not sex education. This is with the Adolescent Family Life project money. We did education where we gave self-esteem courses. In one rural county, there was a huge pregnancy increase, over 60 percent of their teens in high school were pregnant. We worked with the school board, we worked with parents, we worked with the teens, we worked with the school district and the teachers. And we developed a curriculum based solely on self-esteem and raising self-esteem. And I am proud to say that that pregnancy rate has not nearly gone back up to what it was since this started.

Senator SPECTER. Ms. Schaefer, you talk about the issue of prenatal care, that is an enormous problem. I first saw a 1-pound baby when I was visiting an institution in Pittsburgh. The child was as big as your hand.

Ms. SCHAEFER. Yes.

Senator SPECTER. Low birthweight babies are born with problems that follow them a lifetime and which are enormously costly to society. I took the lead on our subcommittee in putting in a program which is now called Healthy Start.

Let me turn to you, Doctor Madeira, if I may. And your comment about putting those who abstain on a pedestal, advising what Principal Hewitt was saying about elevating those who abstain to the

level of Olympians. That certainly would be a very substantial societal pressure to counter the peer pressure of everybody is doing it. Doctor Madeira, would you have any specific suggestion as to how we would get that done?

Dr. MADEIRA. Well, in the conclusion of my written testimony, I state that I think that while efforts by the Federal Government certainly need to be made to reverse the trend that has been going on for the last 35 or 40 years in terms of where the Government has been spending its money for programs like the one that John Plucenik mentioned, but I think that we are basically—we, as adults, need to come to the place where we understand that it is our actions and the license that we have taken with ourselves in permitting ourselves to do things that have traditionally been considered taboo, including our entertainment and things like that, which have led to a situation where we have children, and I refer back to Dr. Wanda Franz and how she said that children are not able to process decisions in the same way we are. And yet I feel that we have come to a place of surrender where we have said we cannot hardly even control ourselves, so how can we in good conscience tell our kids, look, this is not good for you.

And so I do think that the efforts the Federal Government are making in that direction are important, but I think that there does need to be that societal shift where we come to a place where we all agree that there are certain things that are right and certain things that are wrong, and that we will—in the same way that we encourage our Olympians, we will encourage our young people to abstain from sex until they are married and to hold the state of marriage in high regard.

Senator SPECTER. Principal Hewitt, are you saying that times are more difficult today? You have been in the educational system for 25 years, and you started in 1972?

Mr. HEWITT. Right, 1972.

Senator SPECTER. Could you amplify that a little bit? How would you quantify that, what do you see today which is more difficult than what you saw at the beginning of your career in the school system?

Mr. HEWITT. I think the pressures on young people especially in this area, of drugs and alcohol, the availability to them of things that were not available 25 years ago, the breakdown of a sense of family, especially parental responsibility with parents assuming responsibility for what their children do and giving their children proper guidance in making decisions.

Someone on the panel had said earlier about how so often today parents are not connected and that they have turned to the school systems and they have abdicated their responsibility to the schools. So I think more and more there is a breakdown in, just of general moral fiber, especially in relation to families. And I think it could be quantified by many statistics that are out there about the number of instances and the amount of pressure in which children and young people are involved in today.

Senator SPECTER. Mr. Plucenik talks accurately about leaving a good bit of it in parental hands. If you had a grant with a special program on abstinence education, do you think it would have a significant impact on the students in your school, Principal Hewitt?

Mr. HEWITT. I believe it would. And I believe that is because we could identify and target how the education is done. I do not think there is a person on the panel who would disagree that we need abstinence education. I think the question becomes, How is that education given?

Senator SPECTER. You have testified that you know how moral education can be taught. Could you give us just a little insight as to how you would approach it?

Mr. HEWITT. I am convinced that the moral decision for young people today is not cognitive. You can give young people facts, information, data, but when it comes down to the moral decision, they do not think.

When they make a decision, it is more on the basis of how they feel than how they think. So they can have the best information in the world, but if it is not effective, and I applaud the efforts of Ms. Schaefer on self-esteem because I really believe that is the starting point of it and that is effective in nature.

So I believe that granting and funding and having people who are looking at the most effective ways to educate young people, the effective way is the affective method.

More often than not I am afraid that some of the best intentioned people who are out there trying to teach children abstinence are sometimes doing more harm than good, and I would look forward to study, research, grants that would give us the opportunity to look at the most effective ways of educating young people.

Senator SPECTER. Reverend Bissol, you had commented about young people who are being kicked out of the homes because of teen pregnancy, and I think you commented about someone who was taken in. Could you amplify just what happened in that situation?

Reverend BISSOL. Well, I did not have time. The red light came on. I did not have time to finish, but I really believe the problem is basically a family problem, and it is snowballing, in that families, I think, as one person had said, that the adults are allowing things into their lives and then they are trying to dictate to their children not to do these things.

So basically we have a family that is on welfare. The child reached the age of 18 and they allowed the child to—the child was actually encouraged to be promiscuous and then had gone into teenage pregnancy, then had miscarried.

We tried to help the child, we tried to encourage her and when she was 18 she was pretty much kicked out of her house. And she tried to commit suicide. The doctor called us, we took her in and tried to encourage her as to I guess you would call self-esteem.

Senator SPECTER. How do you think a parent should respond in that kind of a situation?

Reverend BISSOL. With the pregnancy of the child?

Senator SPECTER. Yes.

Reverend BISSOL. Well, I think they ought to look at themselves and what did they do. I think they are denying that they are part of the problem, and this is what I see. And, of course, just this weekend I talked to another family who is just at wits end. They are all in turmoil as to what to do. Their daughter had a tubal pregnancy and now is pregnant again, she is 18. And they do not

know what to do. They are going to kick her out and I guess live on welfare. I do not know what is going to happen, but they do not want to admit that they are part of the problem.

And one of the things that I believe is going to happen is that when a child—I think statistics will show that these teenagers who are becoming pregnant live a life of poverty usually, the majority of them do anyway. And then they are going to produce children who are going to have difficulties and this just snowballs. I think that it has got to be turned around basically by teaching these parents their responsibility, that they need to accept some responsibility and very lovingly try to teach the children to start—I think someone said, start over again.

Senator SPECTER. Reverend Bissol, I notice that Ms. Shar Bissol is on our second panel.

Reverend BISSOL. Yes.

Senator SPECTER. Any relation to Reverend Bissol?

Reverend BISSOL. She is my daughter.

Senator SPECTER. She is your daughter. Well, we are about to run out of paper, and this is a good transition point to call upon panel two. I want to thank you very much, Ms. Schaefer, and Reverend Bissol, Ms. Kelly, Doctor Madeira and Mr. Hewitt. These are very complex issues, and we could talk about them at greater length, but that gives the subcommittee some substantial insights, and now we are going to turn to the next generation with the Bissol transitions leading the way. Thank you very much.

STATEMENT OF SHAR BISSOL, ELKDALE CHRISTIAN ACADEMY

Senator SPECTER. How old are you, Shar? Is that how you pronounce your name?

Ms. BISSOL. Fourteen, Shar.

Senator SPECTER. Fourteen. And where do you go to school?

Ms. BISSOL. Elkdale Christian Academy.

Senator SPECTER. As Senator Thurmond would say, would you pull the machine closer to you? [Laughter.]

What do you think of educational programs on abstinence?

Ms. BISSOL. I believe in abstinence because it is the best and only sure way to keep our teens out of trouble today in the schools. And I know that I am looking forward to getting married someday, and when I do, I—like make me feel better if he also believed in abstaining the way I do.

And I know so many teens that have ruined their lives by, you know, not abstaining because the schools and, you know, the parents did not teach it. I know one girl that—

Senator SPECTER. Would you—go ahead.

Ms. BISSOL. And the one girl, she is only 15 and she ran away with a guy because the school did not teach abstaining. And then her parents called the police and said, you know, is there anything we could do about this, my daughter is only 15, can you get her back? And the police said, there is nothing we can do. She is at an age where she reached her own responsibilities and we cannot get her back. So the girl ended up pregnant and, you know, when she came back home, she miscarried the baby. And they put her in like a reform school, thinking that that would help, and it only did a temporary job. And as soon as she got out of the school, she ended

up back with the same guy right where she was before, and now she is pregnant again. She is only 18.

And that is why I think the public schools and all schools should teach abstaining. So, you know, kids can be encouraged to abstain and not, you know, feel like they are isolated because they are pure and they are virgins. I think that——

Senator SPECTER. Well, Shar, you have had obvious familial guidance. Your father has already testified here today. Would you say that as a generalization, there is adequate guidance from the family for young people or do we need some emphasis on abstinence education within the school system?

Ms. BISSOL. I think that the families should teach abstinence. I also think that the school should support families in teaching abstinence so that the school does not go against what the parents are saying, you know.

Senator SPECTER. Does the school go against it in any way that you have seen from what the family is saying?

Ms. BISSOL. Yes, I do.

Senator SPECTER. And in what respect?

Ms. BISSOL. When teachers are getting up there and advertising, like, sex and handing out condoms and stuff and families are trying to teach their children to abstain——

Senator SPECTER. Do they hand out condoms at your school?

Ms. BISSOL. Not in my school because my school is just a small school and like my church, but a lot of my friends' schools they do.

STATEMENT OF BRIANNA SCHMIDT, LACKAWANNA TRAIL HIGH SCHOOL

Senator SPECTER. Is that Brianna Schmidt?

Ms. SCHMIDT. Yes.

Senator SPECTER. Brianna, how old are you?

Ms. SCHMIDT. I am 14.

Senator SPECTER. And you go to Lackawanna Trail High School?

Ms. SCHMIDT. Yes.

Senator SPECTER. Shar Bissol testified that they do not hand out condoms in Elkdale Christian Academy. What is the approach at the Lackawanna Trail High School?

Ms. SCHMIDT. Well, they do not hand out condoms, and there is not really an extensive sex education at our school either.

Senator SPECTER. Do you think that there ought to be courses at school which talk about abstinence?

Ms. SCHMIDT. Yes; I believe abstinence is the only 100 percent sure way not to get pregnant.

Senator SPECTER. And where have you gotten your own insights into abstinence is the only 100 percent sure way?

Ms. SCHMIDT. I think it is pretty obvious birth control and condoms are never sure.

Senator SPECTER. How did you find that out?

Ms. SCHMIDT. School and just——

Senator SPECTER. Parents?

Ms. SCHMIDT. Yes; well, I have always believed that sex should be saved for marriage, and I do not think that there should be any premarital sex.

Senator SPECTER. Are there peer pressures to the contrary that try to persuade you into premarital sex?

Ms. SCHMIDT. I think there has always been peer pressure for sex and for drugs and alcohol. It has not really affected me, because I have always believed that sex should be saved.

STATEMENT OF JESSICA YURKANIN, LAKELAND HIGH SCHOOL

Senator SPECTER. Jessica Yurkanin?

Ms. YURKANIN. Yes.

Senator SPECTER. You are in the 10th grade at Lakeland High School?

Ms. YURKANIN. Yes.

Senator SPECTER. Tell us a little bit about your education there. What courses are there on abstinence-related subjects?

Ms. YURKANIN. There is a parenting class when you get to your senior year, but mainly like even in like fifth, sixth, seventh grade.

Senator SPECTER. Pull the microphone a little closer, please.

Ms. YURKANIN. Like if they do not really have any classes on it, but when we do get on the topic, they mainly tell you not to have it, you should wait. Then they tell you all the diseases and the problems that you can have getting it, like if you do have sex before marriage and all that.

Senator SPECTER. Well, what discussion, if any, is there about condoms?

Ms. YURKANIN. Well, they do say that if you ever do decide, if you think you really want to do it and you are ready for it, you should use condoms or make sure you are safe there.

Senator SPECTER. So they say that if you decide to do it and you feel you are ready for it, then they say to use condoms?

Ms. YURKANIN. Yeah. Because some kids never really listen to what like teachers and that say, they are just going to think that the teachers are older and they probably did it when they were younger and all that.

Senator SPECTER. What do you think of an instruction like that?

Ms. YURKANIN. Well, I, myself, I have had chances where like I have been with guys and stuff like that who have tried to get me to have sex with them and that, but I have turned them down. And then afterwards, they are thankful that I would not do it with them and stuff. And so I am really waiting until I get married, so I do not really care what anyone else says about it.

Senator SPECTER. Well, there is quite a controversy as to whether there ought to be only talk about abstinence or whether the educators ought to talk in the alternative as to the use of condoms. Do you think that there ought not to be talk about condoms or do you think that a student should be instructed as to condoms as well as abstinence in the alternative?

Ms. YURKANIN. I think mainly that they should mainly be teaching abstinence, because a lot of kids, if the teacher starts saying that if you are going to do it, use a condom or whatever, they are thinking, well, the teachers think it might be all right if you do it, you know. They are not really cool with it.

I think mainly one way that would help out a lot is if you found teens themselves who have had sexually transmitted diseases or had gotten pregnant during their teens, if they would be willing to

go around to the schools themselves and talk about how much it kind of ruined their life and how they are not able to do what they really want to do.

Senator SPECTER. Are there any role models like that available in your school system?

Ms. YURKANIN. Well, recently just this year, there is this one girl and she was a senior who has a 2-year-old baby. And in the paper they had a column about how mainly it ruined her life, how she has not been able to really go out with her friends and do what she really wanted to do and how she wished she waited until she got married or at least got out of school and did what she mainly wanted to do.

STATEMENT OF JUSTIN SCAPPATICCI, BISHOP HOBAN HIGH SCHOOL

Senator SPECTER. Let us turn to Justin Scappaticci. Justin, how old are you?

Mr. SCAPPATICCI. I am 16.

Senator SPECTER. Sixteen?

Mr. SCAPPATICCI. Yes.

Senator SPECTER. And you are a senior at Bishop Hoban High School in Wilkes-Barre?

Mr. SCAPPATICCI. Yes.

Senator SPECTER. Are there any courses on abstinence or sex education in your high school?

Mr. SCAPPATICCI. We have a freshman health class that is a mandatory requirement that teaches somewhat of the effects of sex and sexually transmitted diseases. Our junior morality class has about a 3-week period on abstinence programs and safe sex. So we have—

Senator SPECTER. You say a morality class has abstinence and safe sex?

Mr. SCAPPATICCI. Yes; it teaches the effects and what kind of birth control there is.

Senator SPECTER. Do they teach safe sex as an alternative to abstinence?

Mr. SCAPPATICCI. They advise against that.

Senator SPECTER. Advise against that. But do they tell you how to do it if you want to have safe sex—

Mr. SCAPPATICCI. They do not—

Senator SPECTER. Or just how do they handle it?

Mr. SCAPPATICCI. We were shown a video that had many different other birth control methods besides condoms that showed how they are used and the percentages that they have in effecting against birth.

Senator SPECTER. So the emphasis is on what goes wrong as opposed to what goes right?

Mr. SCAPPATICCI. Basically.

Senator SPECTER. Do you think that courses on abstinence in school would be helpful to lead high school students away from pre-marital sex?

Mr. SCAPPATICCI. In a way I do. Being a teenager, I think I have a pretty good insight on to what goes on in a teenager's mind. Abstinence is good for some people, but a lot of teenagers will not have abstinence in their lives. So I think we should protect these

kids as best we can and teach them, you know, to have the safest sex, if they are going to have sex. I know I, myself, believe in abstinence. I have seen so many kids who have, you know, chosen not to use abstinence and have ended up having children or having very close calls, miscarriages or whatever.

Senator SPECTER. Well, that is one of the tough decisions that we are looking at in the Senate, whether you teach just abstinence or as you say, teach that if you are going to have premarital sex this is how to do it more safely. And your opinion is which?

Mr. SCAPPATICCI. I think we just said that we should teach abstinence as a viable solution, but if we cannot reach all of the kids, which I think is—we cannot reach all the kids, I think we should teach them that if you are going to have sex, here is the safest way if you are going to do so.

Senator SPECTER. Shar Bissol, what do you think about that?

Ms. BISSOL. I really do not think that they should even discuss much the alternative because when you discuss it, then the kids think, oh, there is safe sex, you know, and why should I wait, let us have fun now and just go ahead and do it. And then they end up ruining their lives because a condom may help control birth, but it does not guarantee anyone against diseases.

STATEMENT OF SHAWN MCKEOWN

Senator SPECTER. Mr. McKeown, Shawn McKeown, do you agree with Shar Bissol or Justin Scappaticci—

Mr. MCKEOWN. Well, I feel that—

Senator SPECTER. Or do you have a third position?

Mr. MCKEOWN. I feel that abstinence definitely should be taught in high school, and I think that if we only teach it in high school, it is going to fail. I think it should be taught in lower grades.

Senator SPECTER. How far down?

Mr. MCKEOWN. I think as soon as kids start asking questions is when they should be taught about it. That is when I was taught about it at home, that I mean, I come from a Catholic family obviously because I go to Bishop Hoban. And I was taught since—I really do not remember when, but since I started asking questions about sex and about birth control and about, you know, where do babies come from and all of that. And then when I asked the questions, I was given the physical answers, what my parents believe were the moral answers and everything that I really needed.

But I do not feel that a lot of teenagers have the benefit of that that I have, and to tell them in high school I think it is too late. I mean, it is necessary to tell them in high school and keep reaffirming it, but it needs to be started earlier and in a way that does not—

Senator SPECTER. How early would you start it then?

Mr. MCKEOWN. Like I said, as soon as—

Senator SPECTER. As soon as they start asking questions?

Mr. MCKEOWN. Basically, yes. I mean, I do not think it needs to be—I think just the natural course of time when questions start being asked, they should be answered in an appropriate way.

I also think that another point—I think if we just have abstinence teaching itself, we go into high school and teach kids that, you know, this is—you know, we are teaching you abstinence and

nothing else, I do not think it is going to work in most cases. I think the problem with teen pregnancy is much deeper than can be fixed by just teaching abstinence. I think people from a young age need to be taught respect for themselves, respect for other people, and that is true for any situation in social life. I think the biggest problem in this country is nobody seems to have respect anymore or even responsibility in a sense that they think, you know, the answer to most—when you have done something wrong, most people's answer is, well, you know, my parents did not teach me, so that is why I did it so it is OK. And we rely too heavily upon that. And I think that there is not enough taught about respect. I think if teenagers learn more about respect and responsibility in hand with abstinence and to a point sex education as far as knowing about the benefits and the failures of birth control.

STATEMENT OF JASON FARR, BLUE RIDGE HIGH SCHOOL

Senator SPECTER. Jason Farr, let us turn to you. You go to Blue Ridge High School. You are in the 10th grade. What courses do they have at your school, if any?

Mr. FARR. They do not really have many courses for the high school. They do have some for the lower grades, for more the middle school, seventh and eighth grade—

Senator SPECTER. What sort of courses are they presenting in the seventh and eighth grade?

Mr. FARR. They are more promoting the use of safe sex. I mean—

Senator SPECTER. Really, in the seventh and eighth grade?

Mr. FARR. Yes.

Senator SPECTER. Do you think that is a good idea?

Mr. FARR. No; I have seen—I mean, I saw a case where a pastor's daughter in an area, she was confronted in class, and they were handing out condoms and she says, I do not want any. And they says, well, you might as well take them, you are going to do it sooner or later, you might as well get it over with. And they literally told her, you are going to have sex, you might as well get it over with and just do it now.

Senator SPECTER. Who told her that?

Mr. FARR. A teacher.

Senator SPECTER. In the seventh or eighth grade?

Mr. FARR. Yes; so, I mean, it is obvious that it is not going to help anything by telling kids it is all right, go out and do it.

Senator SPECTER. What did the young girl say in response?

Mr. FARR. She was upset. She refused them. She went to the principal's office. She called her father. She was real upset and he was upset, too.

Senator SPECTER. Do you know what happened as a result of that incident with the teacher?

Mr. FARR. They did talk with him, but I do not know if it was ever taken care of entirely.

Senator SPECTER. Jason, do you think that there ought to be the alternative of safe sex to instruction on abstinence or do you think it ought to end with abstinence alone?

Mr. FARR. I think it should definitely end with abstinence alone. I believe that there is no such thing as safe sex. I mean, there is

nothing that is 100 percent except for abstinence. The sexually transmitted diseases, there is no protection against them.

STATEMENT OF MOLLY RADE, NORTH POCONO HIGH SCHOOL

Senator SPECTER. Ms. Molly Rade, you are a senior at North Pocono High School in Moscow, PA?

Ms. RADE. Yes.

Senator SPECTER. We have a good diversification here. Andy Wallace has brought people from all the schools. That is Senator Wallace sitting on my right. Molly, what do they teach, if anything, at North Pocono High School?

Ms. RADE. Well, we have a mandatory health class in 10th grade. We go over like just the reproductive system and all that. There is no really—

Senator SPECTER. Can you pull the microphone a little closer.

Ms. RADE. No real like sex education. There is also a class when you are a junior or senior, it is marriage and single life, but I never took it. So I really do not know what they teach you in that.

Senator SPECTER. What did they teach you in the class that you took?

Ms. RADE. It is just basically—it is not really sex education, but like about the reproductive system and stuff like that.

Senator SPECTER. Do you think it would be helpful to have programs in schools on abstinence?

Ms. RADE. In some cases, I think it would be, but I do not know if it would really be helpful because I do not know if kids will listen anyway. If you are going to do it, you are going to do it. And if you're not, you're not—at least with my friends, they are set in their ways anyway.

Senator SPECTER. Well, you say if you are going to do it, you are going to do it and if you are not, you are not. What are the factors which lead to the decision to do it or not?

Ms. RADE. Mine are my moral decisions. I am I guess—I do not know, I am the typical Catholic girl, I guess, but I follow my commandments and all that stuff, and that is how I feel about that.

Senator SPECTER. So it is a moral decision that you come to school with and you have to have that moral guidance before you get there?

Ms. RADE. That is my feeling on it. That is how I feel about it, but I know people that do not feel that way about it.

Senator SPECTER. For those who do not have that moral guidance, do you think some instruction might be helpful on the moral issue?

Ms. RADE. It may be.

Senator SPECTER. How about all the disease factors to inform young people about the problems or the emotional factors or the problems of interfering with education and careers?

Ms. RADE. That would probably more persuade people not to and the fear of it alone would most likely keep people to abstain.

STATEMENT OF JOHN SHERMAN, SCRANTON PREP

Senator SPECTER. John Sherman, you are a senior at Scranton Prep. What kind of principal is Principal Hewitt?

Mr. SHERMAN. I have just had experience with him as a teacher.

Senator SPECTER. Him as a teacher but not as a principal?

Mr. SHERMAN. Yes, sir.

Senator SPECTER. You can speak freely, Principal Hewitt left, but I will tell him whatever it is you say. What do you think about teaching abstinence in high school, John?

Mr. SHERMAN. I feel that teaching abstinence in high school should be required. I have experienced—now there is a mandatory freshman health class but I had it in my junior year, I believe, I was enrolled in that class. It was a transitional period.

Senator SPECTER. Did they teach abstinence?

Mr. SHERMAN. In the health class, it centered more on diseases and on positive mental health.

Senator SPECTER. Did the instruction on diseases tend to discourage young people from having premarital sex?

Mr. SHERMAN. They showed pictures, and I think I do not have to say anymore.

Senator SPECTER. So the pictures were discouraging?

Mr. SHERMAN. Yes, sir.

Senator SPECTER. How about the moral fiber? Do you think it is possible to teach morality in high school or is that too late? Would you agree with Ms. Rade that either you know it or you do not from the time you get there?

Mr. SHERMAN. Actually no, because I feel that high school students are constantly changing. People change their views on different topics within minutes. It just requires the proper education. I had Mr. Hewitt talk to me in my junior year, and we had our class was on the making of moral decisions.

Senator SPECTER. He talked to you about making moral decisions?

Mr. SHERMAN. Yes, sir.

Senator SPECTER. Did you learn something?

Mr. SHERMAN. Absolutely.

STATEMENT OF CONOR LOGAN, SCRANTON HIGH SCHOOL

Senator SPECTER. How about you, Conor Logan? You are also a senior at Scranton; correct? What did you learn from Mr. Hewitt? Be careful, these gentleman may tell him.

Mr. LOGAN. I learned a gold mine of information that I do not think is—it is taught and it is very helpful at the time it was taught, but at this point to certain children who are receptive, yes, it was very helpful to them. But too many of my friends, it was blown off or disregarded because they have already reached premonitions and they have already had set ways in which they think. And when I was in junior high, we had education but it was all just—abstinence was not taught at all. It was all taught if you are ever going to have sex, use a condom or use certain other methods.

Senator SPECTER. That was not in Scranton Prep though, that was in junior high school?

Mr. LOGAN. Yes; in looking at that now and I see those people that I took those classes with now and they are having sex, and I say to them, I say, what do you have to say about this, and they say—to me they say, well, I am using a condom. And then I look at it I say, how can I say that they are wrong, because they were taught that if you are going to have sex, use a condom. How can I deem them wrong or look at them any less?

If they were taught abstinence and the qualities of that and moral virtue and the things that I have learned this year, and if they were taught that earlier and brought up and maybe used this course this year as kind of a finishing over instead of trying to take this course and break down these walls and rebuild them up again in the course of one school year, it is much more difficult than—I forget who it was who said about answering questions when they were raised, sixth, fifth grade.

Senator SPECTER. That was Mr. McKeown who said that.

Mr. LOGAN. Yes; that is an excellent point, if you start then and you have——

Senator SPECTER. When would you start answering questions?

Mr. LOGAN. As they are brought forward. Maybe not teaching so much on sex, but on what qualities of a person—what qualities make a good person? Why would a person make this decision? And when we looked at that this year and looked at what decision process makes a person decide to have sex, we came to a point where we realize—at least I came to a point where I realized that the thought processes are not mature enough for a person at this age to handle the emotional load that sex brings on.

STATEMENT OF AMANDA FISHER

Senator SPECTER. I have just been advised by Andy Wallace that there is a young woman who is willing to talk who is Amanda Fisher, graduated a few months ago and has some experiences, having had a baby recently, willing accompanied by the school nurse, Anna Doman, would you two step forward, please, if you are willing to share with us some of your experiences?

Amanda, we appreciate your being willing to talk. Tell us a little bit about—and you are accompanied by Ms. Anna Doman. Ms. Doman, you are the school nurse?

Ms. DOMAN. Yes.

Senator SPECTER. And you are accompanying Ms. Amanda Fisher, who has volunteered to talk about her own experience?

Ms. DOMAN. Yes.

Senator SPECTER. You are nodding your head yes. OK. Amanda, tell us of your own experience. We are not pressing you now, but if you are willing to speak, we would be interested to hear.

Ms. FISHER. Well, I am only 17, and like she said, I got pregnant a week into my senior year of high school. I had the baby 3 months ago, he is fine and all that, but the thing is is that it is unbelievable, all these kids talk about it and no one has an idea of what it is like to go through it. And I can only hope that when my child goes through school that he is taught abstinence because it really—I was on birth control pills and it happened anyway. There is no safe way

Senator SPECTER. And how old are you now?

Ms. FISHER. I am still 17.

Senator SPECTER. And you were 17 when you became pregnant?

Ms. FISHER. No; I was 16 when I got pregnant.

Senator SPECTER. You were 16. And do you think an abstinence course would have helped you avoid the situation?

Ms. FISHER. I think it would have helped, yes, but I think it goes back to the woman who said it is all about self-esteem. And your

parents can teach you—my parents taught me well. They taught me everything I asked, but when you see your friends and you see these guys and your friends doing it or older kids, you know, you look up to older kids when you are younger, and it is all there. You see everything.

Senator SPECTER. And you saw them doing it?

Ms. FISHER. Oh, sure. Sure. You hear it talked about, you know. It is the cool thing to do. Like when you are a freshman in high school, the dream is to date a senior guy, and what is a senior guy thinking about, you know.

So I think if kids are taught, you know, to respect themselves and care about themselves and to care about everything besides just, you know, in school it is just grades, grades, grades. It is not. It is about so much more. And it should be taught from like fifth, sixth grade because that is when it is starting now. There is drugs in the middle schools and there is sex in the middle schools. And it is not going to go away. It is not going to go away on its own and it is not going to go away by parents telling—

Senator SPECTER. Sex in the middle schools at what grade?

Ms. FISHER. Our middle school starts at fifth grade, and I am almost sure, I will bet anything that there are some that age that probably do.

Senator SPECTER. And what type of support or instruction did you get at home?

Ms. FISHER. At home, I feel my parents told me that if—you know, my mother also had a child when she was about 16, so she was very against anything like that. She was always worried when I was out. She was always asking me, are you having sex, are you having sex, and I was always telling her no. You know, she tried so hard.

Senator SPECTER. Did her experience have an impact on you?

Ms. FISHER. It scared me a lot. I never wanted—

Senator SPECTER. It scared you a lot?

Ms. FISHER. I never wanted it to happen.

Senator SPECTER. But not enough?

Ms. FISHER. I guess not. I guess I could have used a little extra guidance.

Senator SPECTER. Did—could have used a little extra guidance. What happened to your mother when she gave birth at 16?

Ms. FISHER. Well, she was forced to quit school. You know, eventually she went back, got her GED, went to college and all that. But she did quit school. She moved out, married my father. I have two other brothers, they are fine. I also got married as well, but I stayed in school and I am going to college.

Senator SPECTER. Did your mother marry your father—

Ms. FISHER. Yes.

Senator SPECTER. With whom she had a child when she was 16?

Ms. FISHER. They have been married 28 years, yes.

Senator SPECTER. And you are married as well?

Ms. FISHER. Uh-huh.

Senator SPECTER. How old is your husband?

Ms. FISHER. Twenty-four.

Senator SPECTER. The—of course that is not a senior in high school, when you are 17.

Ms. FISHER. No; I was not—I met him when I was in my junior year at a place where I worked, that is how I met him.

Senator SPECTER. So what is the advice and guidance that you have for other 17-year-olds or 14-year-olds?

Ms. FISHER. To just use their head. I mean, it is all fun and it is—you know, you go home and you think it is—your heart's pounding and you are all happy, but it is not that glorious. When you are sitting there waiting for a pregnancy test to turn, it just is not. I would never take back my child for the world, I love him. But if I could have done things different, I think——

Senator SPECTER. If you had it all to do over again, what would you do?

Ms. FISHER. I do not know if I can answer that, because like I said, I love my baby.

Senator SPECTER. Well, that is the question.

Ms. FISHER. I would not change having him. I might change—I would love to change the timing where I had him. I would love to go to the school I wanted to go to.

Senator SPECTER. How old is your son?

Ms. FISHER. Three months old.

Senator SPECTER. Do you think abstinence courses in school or support of the Federal Government would be helpful to lead teenagers in the right direction away from premarital sex?

Ms. FISHER. I think so, yes. I think like everyone saying not—not even thinking of alternative methods. Like maybe for those that are in school now, you would have to finish the bracket of teaching alternative methods because that is all they have been taught so far. But if we could start next year teaching fifth graders, sixth graders abstinence, and that is the way it should be taught forever.

CONCLUSION OF HEARINGS

Senator SPECTER. Well, thank you all very much. This is very instructive as you might guess. It is been a while since I was 17, and it is been a while since my colleagues in the Senate were as well. And these notes will be taken now and I will be discussing this with the people in the Senate. We are going to go ahead—I think we are going to be increasing the funding. I think there is a strong case to be made, not only from the first panel of people who have had experience in the instruction but also from this panel who are students. So I thank you all very much. That concludes the hearing.

[Whereupon, at 3:27 p.m., Monday, July 29, the hearings were concluded, and the subcommittee was recessed, to reconvene subject to the call of the Chair.]

Material Submitted Subsequent to Conclusion of Hearings

[CLERK'S NOTE.—The following statements were not presented at the hearings, but were submitted to the subcommittee for inclusion in the record subsequent to the hearings:]

LETTER FROM ELIZABETH Z. CATHEART, EXECUTIVE DIRECTOR

FAMILY HEALTH SERVICE,
Chambersburg, PA, July 26, 1996.

Hon. ARLEN SPECTER,
U.S. Senate,
Hart Building, Washington, DC.

DEAR SENATOR SPECTER: We appreciate the opportunity to provide information to you regarding our experience in working with teens and young adults as part of our on-going educational programs on sexuality from an abstinence based perspective. As a family planning agency we are very cognizant of the ramifications of teens receiving inadequate information usually too late.

Programming is provided by our educational staff who not only work directly with the above populations but also collaborate and coordinate activities with many other community agencies in three of Pennsylvania's very rural counties—Franklin, Fulton and Bedford.

The Education Coordinator has worked at the agency for over fifteen years in a variety of roles. With a solid knowledge of the philosophy of family planning, she has been the catalyst in providing a wide variety of programs around the topics of sexuality, parenting, and postponing sexual involvement to diverse audiences. A well respected member of the field of parent and family life education, she has been acknowledged for her accomplishments by various organizations including the 1995 March of Dimes Award for Outstanding Service.

Our Community Educator joined our staff last year and brings with her a wealth of experience as a Certified Health Education Specialist with a Master of Education degree in Health Education. She has worked with the University of Pittsburgh Student Health Service Education Office and the Staff Development office at McKeesport Hospital. Mary Wyandt is the person your staff have been speaking to regarding the attached comments.

Sincerely,

(MRS.) ELIZABETH Z. CATHEART, MPH, BSN, RN, CNA,
Executive Director.

Enclosure.

POSTPONING SEXUAL INVOLVEMENT (HOW TO SAY NO)

Postponing Sexual Involvement (How to Say No) is one program offered by Family Health Services of South Central PA, Parent and Family Life Education Department. This series is based on the value that young people should not be sexually involved. It increases the early adolescents' understanding of the pressures that influence young people's sexual behavior through social inoculation theory. Responses are introduced and practiced, which help them deal with pressure situations and feel more comfortable with saying no. This abstinence-based program is developmentally adapted for the middle school child to assist them in their biological, cognitive, and socio-emotional maturation process. It is noteworthy to realize that this series is not anti-contraceptive in nature. Rather than providing a disservice, students' questions and expressed concerns are addressed when they arise. However, it is important to understand that the overall theme of abstinence is emphasized as a viable option that many teens are successfully choosing.

Postponing Sexual Involvement (PSI): An Educational Series for Young Teens originated in the early 1980's by Marion Howard, PhD, Department of Gynecology

and Obstetrics, Emory University and Grady Memorial Hospital. It was designed as a peer education series for eighth graders with the idea and intent that sexual involvement should be postponed. The program's goals are: (1) to help young teens understand the pressures in our society which influence young people's sexual behavior, (2) to help young teens understand their rights in social relationships and ways of meeting social and personal needs other than by sexual involvement, and (3) to help young teens deal with peer pressure situations through the use of assertive responses and actions. Program evaluation has shown that students not participating in the PSI program were five times more likely to begin having sex by the end of eighth grade than students who had been through the program (20 percent vs. 4 percent). In addition, a lasting effect has been acknowledged for by the end of the ninth grade, 39 percent of the sampled students who had not been through the program began having sex, compared to 24 percent of the sampled students who had participated in the program. (Howard & McCabe, 1990)¹

Using the theoretical framework of the PSI series, Family Health Services of South Central PA has adapted the original program to better meet the community needs of the school districts in Franklin, Fulton, and Bedford Counties. With the goals of the PSI program in mind and establishing a general abstinence-based curriculum, Family Health Services set forth to bring its program into the schools. Several preliminary meetings are held with appropriate school administrators, teachers, and Boards. When initial school interest has been identified, a presentation for the local ministerium is often the next step. With the support and acceptance from the schools and the ministeriums, the Postponing Sexual Involvement program of Family Health Services has been offered throughout the tri-county area served by the Agency. For over the past 10 years, the program has been presented with a steady rise in the number of school districts participating with wide support from the communities.

Prior to implementation of the series for youth, parent letters are sent home outlining the program and inviting them to an evening workshop. During this session, parents are given a packet of materials with all of the PSI handouts plus various information on adolescent development, how to better communicate their values to their teens, "homework" to complete with the assistance of their teen on the effects of media, and the opportunity to prepare for the teens first night's homework: "Ask your parents what the qualities and differences are in mature love and a crush." Emphasis is placed on the importance of parent child interaction. Parents are reminded that they are and always will be the primary sexuality educator of their children, and that we are here to inform and help facilitate that process. Many parents have been thankful for this opportunity. All parents have the choice to allow their child not to participate.

Family Health Services then provides the PSI series to either seventh or eighth grade classes (depending on at which grade level health class is presented) during their regularly scheduled health periods. Presented in four separate sessions, students are provided with the opportunity to explore the social and peer pressures associated with the sexual behavior of young teens. In addition, the possible consequences and reasons why some teens make choices to have sex are identified and discussed. The students are then provided with skills for dealing with pressures to become sexually involved.

The first session focuses on identifying social pressures and promotes an understanding of why some teens might become sexually involved and how their needs could be better met in other ways. The second session looks at peer pressure and explores the influence of peer pressure in group and one-on-one situations. With an understanding of the pressures that teens deal with as was identified in the first two sessions, the third session serves to establish an understanding of ways to look at limiting expressions of physical affection and to give guidance in handling difficult social situations. In addition to providing the opportunity to discuss the sexual behaviors of young teens and the pressures that influence them, the participants are provided with skills for dealing with those pressures through the use of assertiveness. By the end of the fourth session, role-play is utilized by giving students various scenarios involving pressure so that they can demonstrate their empowerment by assertively resisting social and peer pressures to become sexually involved. Throughout the program series, students have the opportunity to openly discuss the subject matter and ask questions pertinent to their needs.

Indeed the program is most effective when provided in collaboration with a school district's developmentally appropriate health curriculum. Prior to PSI, teens should have a clear understanding of the changes of puberty, pregnancy, STD's and HIV/

¹Howard, M. & McCabe, J.B. Helping teenagers postpone sexual involvement. *Family Planning Perspectives*, 1990, 22(1), pp. 21-26.

AIDS. Some of our school districts incorporate the advantages and disadvantages of contraceptive methods within their health curriculum. In conjunction with the PSI program, this provides a more comprehensive approach to sexuality education.

Overall, the school districts, parents of students, and the students we serve express that there exists a great need for such programs and are grateful for the educational services we are able to provide. This becomes clearly evident when reading comments written by students at the end of the series. From their evaluations, many of the young teens we work with indicate that they have in the past and are currently experiencing pressures to become sexually involved. Many of them state that they feel that this program has made them more aware of the social and peer pressures influencing young teens to become sexually involved. More importantly, many of them comment that after participating with the program, they feel more capable of and comfortable with addressing pressures to become sexually involved. Many of the students feel that other teens should also participate in with this program.

In the near future, a compilation of the students responses to the evaluation will be submitted for your review. Thank you for your consideration and allowing us to share with you our experiences with abstinence-based education.

PREPARED STATEMENT OF LISA HOSLER, EXECUTIVE DIRECTOR, SUSQUEHANNA VALLEY PREGNANCY SERVICES

Susquehanna Valley Pregnancy Services, a non-profit agency serving women, men and teens unprepared for pregnancy, has been providing abstinence education to school districts and communities in the Susquehanna Valley since August of 1990. We've been in five counties, 22 school districts, eight private schools, four colleges and 55 community groups, reaching nearly 34,000 teenagers and young adults with a message on saving sex for marriage.

Our format is an hour-long didactic presentation featuring a dynamic speaker, professionally designed graphics, plenty of real-life stories, and an interaction segment as time permits.

The presentation includes the reasons unmarried teens are sexually active, the physical and relational consequences of sexually activity before marriage, how to build positive relationships without sexual involvement and how sexually active teens can return to a lifestyle of abstinence. Afterwards, handouts and pamphlets on saving sex for marriage are made available to the students, along with jacket buttons which say, "I'm Worth Waiting For." Seventy-five percent of the students take the buttons, indicating their desire to value themselves and abstain from premarital sex.

Reactions from students and teachers alike have been overwhelmingly positive. Here's a sampling of comments we've received:

"I really want to thank you for your outstanding speech on premarital sex. I now feel so good about myself, and I know that I *am* worth waiting for."—Student.

"Everything you discussed about sex, communication and trust is exactly what a teenager needs to know. I think what you said needs to be told to every teenager."—Student.

"Thank you for speaking to our health class last December. As always, you did a fantastic job and our students greatly benefited from your presentation on abstinence."—Teacher.

"As I looked around the room during the hour, you had the attention of every single person."—Community leader.

"I want to express my appreciation for your excellent presentation. I spoke to numerous students over the past few days and all of them were very positive about their presentation."—Assistant superintendent.

"In my 25 years of secondary education, I have never heard a speaker present such straight-forward, important information in such a dynamic way."—High school principal.

Because of the effectiveness of our abstinence presentation, Susquehanna Valley Pregnancy Services has been invited back into most school districts in Lebanon and Lancaster county year after year. Our presentation, which has been published by Loving & Caring, Inc. in Lancaster, has been purchased by 350 organizations across America.

While it is difficult to obtain hard statistics on the impact of the abstinence presentation in decreasing teenage sexual activity, based on the popularity of the presentation with students and school districts, the students' attentiveness during the presentation, and the number of students who take our literature and "I'm Worth Waiting For" pins, we believe that the presentation is effective in decreasing teenage sexual activity and equipping teens to build healthy relationships while saving sex for marriage.



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